

Self-esteem is the way we perceive our own worth. This perception has a major impact on many areas of our lives, including our ability to be happy. It is influenced by our inherent personality traits, our childhood and subsequent life experiences, the messages we receive from others and the message promoted in the mass media.

Common faulty-thinking patterns that diminish our self esteem include comparing ourselves with others, rating our worth on the basis of our achievements, having an excessive need for approval, over-generalising and labeling ourselves. Healthy self-esteem is maintained through self-acceptance. This means accepting our perceived flaws or imperfections without labeling ourselves as defective or “not OK”.

Common symptoms of poor self-esteem include the need to please or impress others and to avoid self-disclosure and honest communication. Self-talk is something everyone does; it is those thoughts we have about ourselves and our lives. These thoughts have a direct effect on our mental health, which can be good or bad depending on what the thoughts are. For example, you might compare yourself to people at school and tell yourself that you’ll never be as “cool” as them. This may lead to you thinking you are not good enough to talk to those people, and then feeling insecure around them.

Thoughts can become habits that are hard to break. So if your self-talk is always negative and you get down on yourself, it may be hard to believe the good things about yourself. You need to treat yourself the way you would treat your best friend—a best friend would always be supportive and talk to you in a positive way. Paying attention to what you automatically think can sometimes be very revealing—we are what we think!!!

LOOK, LISTEN, TALK AND SEEK HELP

www.youth.nt.gov.au

www.youthweek.com



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National Youth Week
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FAMILY MEDICAL CENTRE

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Contents:

- *Stress Management + Healthy Lifestyle Issues*
- *Alcohol*
- *Marijuana—what it really does??*
- *Understanding self-esteem and how it influences how we think*
- *Website and Community resources*
- *How to get help!!*
- *Self-esteem*

This newsletter is an opportunity for us to both inform and educate our patients about some topics of interest with a focus on mental health. ASFMC has received a \$2000 grant to cover part of the cost in putting this newsletter together from the NT government. We hope it generates some discussion in your family/household and with friends about these different topics.



beyondblue
the national depression initiative



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Stress is a response to an event or situation. It can be positive or negative. Stress is common in daily life and may be associated with work, school, family or personal relationships. It usually means that something is happening that's causing worry and affecting how we are thinking and feeling.

Abnormal stress can have many troublesome physical and emotional effects on us, but they vary from person to person. Common problems are tiredness, fatigue, anxiety, sleep disturbance, poor concentration, restlessness and irritability. Stress-related illnesses include depression, drug abuse(including problem drinking), irritable digestive system, peptic ulcers, headaches, mouth ulcers, impotence, irritable bladder, dermatitis—skin rashes, heart disease, breast pain and cancer.

The first step in reducing stress is to identify what stress is and how it impacts on your life. We have all experienced stress and know what it feels like to be stressed. It is a part of life. But it is still an individual experience, and has different meanings to different people. Some people might describe stress as tension, others as worry or a feeling of being out of control or overwhelmed.

Ask yourself this question: **What does stress mean to you and how does it interfere with your life??**



Stress can be triggered by many external factors. These may involve significant life events such as injury, illness, relationship breakdown, or death of a family member. Everyday concerns, such as financial or work worries, an overdue school assignment, or family problems can also trigger stress.

The experience of stress is also influenced by internal factors. What that means is that a single event can happen to 100 people in the same external environment and yet there are 100 different versions of what that event was. How an individual person responds to stress will be determined by their:

- perception of the stress (some people are extremely threatened by giving a speech, and might have a panic attack while others really enjoy it)
- personality factors, including "locus of control" (perceived degree of control over what happens to both themselves and others around them)
- expectations of themselves (some people have very high expectations of how they will perform, and feel stressed by wanting to achieve such a high level)
- coping skills they have learnt in the past to help them deal with the stress
- the other supports available, eg. Parents, close friends, knowledge of community resources, websites etc

Make a list of things that create stress in your life. Be specific!!! Rate them on a score of 0 (no stress) to 10 (extreme stress—worst)

Community Numbers:

Central Australia Mental Health Service	08 8950 4600
SARC – Sexual Assault Service	08 8951 5880
Domestic Violence Counseling Service	08 8952 6048
Community Mental Health	08 8951 7710
SANE helpline	1800 688 382
Beyond Blue Info line	1300 224 636
MensLine Australia	1300 789 978
LIFELINE	13 1114
LIFELINE's "Just Ask"	1300 13 11 14
CRISIS LINE	1800 019 116
Suicide Call Back Service	1300 659 467
Children's Chat Line	1800 332 333
Kid's Helpline	1800 551 800
Alcohol and Drug Life Service NT	1800 131 350
Family Drug Support Australia	1300 368 186

Websites for young people:

www.headroom.net.au	www.beyondblue.org.au
www.ybblue.org.au	www.moodgym.anu.edu.au
www.itsallright.org	www.climate.tv
www.reachout.com.au	www.depressioNet.com.au
www.youthweek.com	

If you are aware of any other resources please let us know on the feedback form enclosed with this newsletter. We truly would love to hear back if you thought this newsletter was helpful in anyway or not!! If community feedback is positive we would probably continue to do something similar next year.



Anxiety disorders are fairly common. Often people develop anxiety in their teens and around **1 in 25 people aged between 13—17 years** of age will experience anxiety in any given 12 month period. For those aged between **18—25 years, the number is higher at around 1 in 10**. The normal, healthy type of anxiety is usually brought on by a problem in your life right now (such as a test or a job interview). It usually only lasts a few hours or a couple of days at most and it doesn't affect your health or get in the way of other parts of your life. Too much anxiety, however, can be totally overwhelming and get in the way of other things such as how well we do at school or work and how we get on with our friends and family. A person experiencing an anxiety disorder will find that their feelings of anxiety:

- Are more intense and last longer (weeks, months or more)
- Negatively affect their thoughts, how they act and their general health
- Cause them distress and get in the way of their day-to-day enjoyment of life.

The table below shows some of the symptoms that might happen:

Behaviours

Avoid going out

Finding ways to lessen feelings on anxiety, such as always having someone with you or carrying a phone at all times

Avoiding eye contact

Using alcohol or drugs to calm yourself down

Thoughts

"I'm going crazy"

"I won't have anything interesting to say"

"I cannot control my worry"

"I have a serious illness the doctors cannot detect"

"What if germs get on my hands and I get sick?"

Feelings

Confused

Anxious

Tense all the time

Constantly nervous

Panicky

Terrified

On edge

Scared

Physical

Blushing

Trembling, dizziness

Heart racing

Numbness, tingling

Nausea

Sweating

Shaking

Shortness of breath



The responses of the mind and body to stress are actually **adaptive**, that is, they help us to survive in dangerous situations. This is called the **"fight—flight response"**. Stress can be both a positive and negative experience for the individual. Feeling stressed before an exam may push you to study harder and do well as a result. On the other hand, if your response to the stress is to avoid studying, you do not perform well. A problem can arise if stress continues for some time. The body uses up a lot of energy trying to respond, and we can become exhausted and more prone to illness, such as infections.

Have you ever noticed that you get skin outbreaks, cold sores recur, or acne gets worse, or you get the cold/ URTI/ gastro cruising town when you are stressed out? What can you do to cope better?

- Talk it over with someone—regular chats with a trusted person can be really helpful. This could be family, friends, acquaintances, teachers, doctor, nurse, community mental health worker, priest or some of the phone number services like Lifeline
- Look for solutions: stop escaping. Write the problem down, look at the pro's and con's in finding a solution. Also remember to take a break
- Practice relaxation eg. Listen to music, pay attention to your breathing. Consider aromatherapy, perhaps with a massage
- Learn to meditate, practice positive thinking, get plenty of rest
- Develop healthy hobbies—eg. Sport, creative outlets, bushwalking
- Do things that you enjoy eg. go to the movies or a concert / show
- Eat sensibly—3 meals a day, 2 serves of fruit and 5 serves of vegies
- Exercise for 30 minutes, 4 –5 x a week; drink plenty of water
- Avoid smoking and other drugs, and limit alcohol and caffeine drinks
- Consider getting a pet
- Humour and laughter are great stress relievers. So try having a joke with a friend or hire a comedy DVD / video. Sometimes it is a real effort but remember it can bring about positive effects.



Resources that are recommended by ASFCM/ Dr. Mitchell include:

- "Feel the Fear and Do it Anyway" by Susan Jeffers
- "Change Your Thinking" by Sarah Edelman
- "The 7 Habits of Highly Effective People" by Stephen Covey
- "Every Day Counts—Your System for a Healthy Body and Balanced Lifestyle" by Mark McKeon

Alcohol

Alcohol is a central nervous system depressant, although in smaller amounts it may appear to have a mild stimulant effect. The main psychoactive ingredient in alcoholic beverages is ethyl alcohol, produced by the fermentation of sugar by yeast. Alcoholic drinks vary in strength eg, beer and alcoholic sodas can be between 1—9% alcohol, wines 10—15% and spirits 35—55%.

Alcohol is a legal drug that is sanctioned by cultural and social norms in Australia. 70—80 % of the population drinks in a way that causes few problems. Alcohol contributes to gross national product (GDP) yet the annual cost to the Australian community of alcohol-related social problems is estimated to be \$7.6 billion.

Intoxication is the most common cause of alcohol-related problems, leading to injuries and premature death. As a result, intoxication accounts for 2/3 of the years of life lost from drinking. Alcohol is responsible for :

- 30% of road accidents
- 44% of fire injuries
- 34% of falls and drowning
- 16% of child abuse cases
- 12% of suicides
- 10% of industrial accidents



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As well as deaths, short-term effects of alcohol result in illness and loss of work/school productivity eg. Hangovers, drink driving offences. In addition, alcohol contributes to criminal behaviour—in Australia > 70% of prisoners convicted of violent assault have drunk alcohol before committing the offence and > 40% of domestic violence involve alcohol.

Each year, approximately 3000 people in Australia die as a result of excessive alcohol consumption and around 65,000 people are hospitalised.

Long term excessive alcohol consumption is associated with:

- heart damage
- liver damage
- increasing risk of breast cancer
- sleeping difficulties
- high blood pressure and stroke
- cancers of the digestive system
- sexual impotence and reduced fertility
- brain damage with mood / personality changes

WOMEN: Less than 2x Standard Drinks per day, with 2x alcohol free days per week

MEN: Less than 4x Standard Drinks per day, with 2x alcohol free days per week

Alcohol and Drug Information Service 1300 13 1340 24 hours

Cannabis / Marijuana

Cannabis is a general term given to drug products derived from the cannabis plant. Cannabis (or marijuana) usually refers to the dried flowers and leaves of the plant, which are smoked or eaten to produce a psychoactive effect.

Other names for cannabis include grass, dope, pot, weed and mull. The main active ingredient in cannabis that produces a "high" is called delta-9 tetrahydrocannabinol, or more commonly, THC. Cannabis in its various forms is often smoked in a "joint", which may include tobacco as filler. Heads may be smoked in a small pipe or larger water pipe ("bong"), a pipe-full usually referred to as a "cone". Hash or hash oil may be added to tobacco cigarettes, joints or cones. It is a more concentrated form of cannabis, with higher levels of THC. The different forms of cannabis can also be eaten mixed with food.



Cannabis is the most widely used illicit (illegal) drug in Australia. According to the 2004 National Drug Household Survey 34% of the Australian population reported using cannabis at some time, with 11% having used it in the last 12 months.

26% of 14—19 year old reported ever using cannabis. 55% of 20—29 year old reported ever using cannabis. The average age of first use was 18 years of age.

Prolonged use of cannabis impairs young people's ability to learn and develop social skills, and lowers achievement in a number of areas. Young users may observe that performance at school or work suffers. Some describe poor concentration, poorer memory, and problems with learning. Regular users may find they begin to lose energy, drive and interest in activities. Furthermore they may spend less time with friends who do not use cannabis, and those friends may feel that cannabis has had a negative effect in their friend's motivation and attitudes. These problems usually disappear gradually when cannabis use stops. Cannabis can produce unpleasant experiences for some users, usually when too large a dose has been taken, resulting in anxiety, panic reactions or paranoia. These reactions last only as long as the effects of the drug.

Cannabis use can also sometimes precipitate psychotic episodes or symptoms in vulnerable individuals, such as people who have schizophrenia. For people with schizophrenia, cannabis use is likely to aggravate their symptoms and should be avoided. Evidence suggests that cannabis may somehow trigger schizophrenia in those who are already at risk of developing the disorder. People with a family history of schizophrenia should avoid using cannabis altogether. There is also a substantial amount of evidence to suggest cannabis use, particularly frequent or heavy usage, predicts depression later in life. Long term effects are associated with an increased risk of respiratory illnesses associated with smoking, including cancers. People also suffer with decreased memory and learning abilities, and decreased motivation in areas such as school and work, affecting their potential later in life. Think next time someone offers you a tokel!!! - it might not be as harmless as you think.