

Mental Health

AWARENESS WEEK

APRIL 30-MAY 6, 2017

Huron Perth
Mental Health and
Addiction Network
Huron Perth
Children's Mental Health Network

SUICIDE PREVENTION- EVERYONE'S RESPONSIBILITY!

The topic of suicide is a tough one. It is painful to lose a

loved one at any time but death by suicide is particularly difficult to understand. Youth suicide is especially painful as no one wants to see that a young person experiences the level of dark thoughts and sense of desperation that contribute to the decision to take one's life. No single organization is charged with the responsibility of suicide prevention but it has been the loss of a number of young lives by suicide that has rallied community partners together to work to prevent suicide.

With the help of a three year grant (2013-2016) from the Ministry of Children and Youth Services, community partners in Huron and Perth have participated in training, consultation with communities impacted by the death of

Huron-Perth Centre, in collaboration with youth from Huron & Perth present. Mental Health

Featuring Local Youth Acts & Talents

Tuesday, May 2rd 2017 6-9pm

@ Avon Public School 31 Huntingdon Ave., Stratford Admission by Donation All proceeds support the Huron-Perth Centre Avon Maitland Generously Sponsored By: For more information email: michellee@hpcentre.on.ca

a youth by suicide, and research. These activities have served to build capacity to understand the factors that contribute to youth suicide, identify key elements of a comprehensive strategy and, in the course of this work, identify actions that are needed to strengthen system responses to youth at risk. Through these experiences community partners have solidified a commitment to the formation of the Huron Perth Suicide Prevention Advisory Committee. The committee is comprised of leaders from Avon Maitland District School Board, CCAC – Mental Health & Addiction Nurses Program, Choices for Change, Huron County Health Unit, Huron Perth Catholic District School Board, Huron-Perth Centre for Children and Youth Huron Perth Helpline and Crisis Response Team, North Perth Hospice, and the Perth District Health Unit.

The inaugural project has been the creation of the Huron Perth Collaborative Community Response for Children and Youth at Risk for Suicide. The work of the plan is incomplete but partners are anticipating a staged release. Founding partners will sign off on their roles later in May with other phases to be completed throughout the summer. The document will be available to the public upon its completion, targeted for fall 2017. This community plan, when complete, will help define roles and responsibilities for prevention, intervention and postvention and offer a number of links and resources. Collaboration is crucial to the success of this plan. The prevention of youth suicide is everyone's responsibility.

There is a broad role for every person. At the heart of prevention is the creation of safe, inclusive communities where everyone belongs and can access support when they need it. Suicide prevention is really about life promotion and cultivating caring communities.

Another aspect of the work has been to develop materials that help to convey this message. A local artist, Caitlin Robb has created an image that will be used with all written materials. Her work captures the isolation that is often experienced when one struggles with mental health.

The creation of this community plan has been supported by new Child & Youth Mental Health investments from the Minis-

try of Children and Youth Services and by a grant from the Brain and Mind Matters Community Fund held within the Stratford Community Foundation and the Cowan Foundation.

~ Submitted by Terri Sparling, CEO for Huron-Perth Centre/Chair of the Huron Perth Youth Suicide Prevention Advisory Committee



FAMME

TAKING CHARGE OF YOUR MENTAL HEALTH – ONE JOURNEY TOWARD WELLNESS

I grew up in a regular family life, safe environment, and supportive family however I had lots of losses as child, lost my mom at 7 years old, grandparents and brother before I was 18, attachment issues as teenager, always carried a feeling of bad things happening.

1994 was the birth of our son Mitch, I had feelings of doubt daily, afraid of hurting him, afraid to lose him, panic and illness constantly, scared of him, of not knowing what to do, I was sure he was going to die

In 1996 there were signs of development issues with Mitch as well as gut feeling that something was wrong with him. I started having stomach pains etc. for no reason, my family doctor thought it was post partum but soon believed I needed to be hospitalized for anxiety and depression which was my first stay in hospital. I believed when I was discharged that I was all better and went back to life, stressful job, a diagnosis of Autism for Mitch, volunteering at church, Sunday school, service clubs etc.

I continued with medications and follow ups with but slowly I withdrew from everything, friends, volunteering, family and I stayed on my couch. It was safe, I did not have to talk to people or explain why I was not working. I never shopped, never got the mail, never cooked meals (however I still don't) my husband was amazing; he did everything at home and ran a business.

It took me a few years before I agreed to go to community psychiatric service. Even after taking the huge step of asking for help again I worried about how was I going to explain that I was going "that place" (where I might be seen and people may talk) for counselling. I started feeling angry that other people talking was affecting how I felt about going for help and getting well. The stigma of Mental Health could have stopped me but I did not let it. Honestly, the first few groups I attended I 'pretended' to work on things, talked about minor things, events etc. but not me, I watched other group members get well and no longer attend groups, then a group member told me I was wasting my time, and remember being shocked that she would say that. After time I realized I was going nowhere and not getting better and I decided I did not want to continue feeling the way I was.

Counselling appointments, insight group, goal group, assertiveness training and cognitive behaviour therapy....over the years has given me the tools to know what I need to do to stay well. I had to commit to looking after myself and having me time but also for me it was doing the homework for assertiveness and cognitive behav-

iour groups, being accountable for not accomplishing my goals because that was what I needed to get back to my life. My life may look a little different now than before my mental health issues, because sometimes it takes work to make sure I can handle all the situations that my life gives me like being a parent of an Autistic child, now young adult in college, being a foster mom to sometimes 3 children, being married to a workaholic who co-owns a business does add a lot of stress to my life at times but for me staying in my weekly insight group, staying on my medications and regular appointments with my wonderful counselor has proven to work. I stay well or I don't spiral down as far anymore. I learned so many strategies to use to overcome my panic attacks, learned how to change my thoughts before those thoughts took over, remembering to keep doing the activities I used to enjoy because the enjoyment does come back eventually and now I have my photography to do when I want time away. Assertiveness training...rehearsing and role playing situations so I knew I could answer the person who wants to know why I don't work, the skills in this group taught me that I can say no...and not feel guilty. Cognitive Behaviour therapy...my toughest group because it takes hard work and takes a while to see the benefits taught me how to reframe my thoughts so they do not lead me to panic and anxiety.

Maybe I am different. I am in no rush to "graduate" from services at this time. I know what I need to have a good life and that includes my weekly insight group at this time. Maybe if I did not have so many situational triggers in my life I would be ok, but for now this works for me.

We work with teen foster girls and when I see the bullying they get because they have some mental health issues it angers me; when I watch family members suffer for years without getting help because of being judged, the stigma angers me. Ending the stigma has come a long way but it still has miles to go and I will continue to tell everyone my story, my struggles and my achievements because I am getting what I need to stay well, be a strong mom and advocate for my son, foster teens and at risk adult girls and still be a supportive wife, co worker and friend because I asked for help.

Phyllis Helm

Stigma refers to negative attitudes or beliefs that are held about people who are perceived as different and we must work to end this in mental health, people with disabilities or anywhere else it happens.

We believe that positive relationships are the foundation for healing and for realizing the potential in all persons.



The Huron-Perth Centre provides timely access to a range of assessment and treatment services offered by skilled professional staff in collaboration with children, youth, families and the community.

570 Main St. W Listowel, ON N4W 1A8 Ph: 519-291-1088 Fax: 519-291-9850

73 Wellington St, Box 100 Clinton, ON NOM 1L0 Ph: 519-482-3931 Fax: 519-482-9251

3 Lorne Ave E, Unit 2A Stratford, ON N5A 6S4 Ph: 519-273-3373 Fax: 519-273-0892

CHOICES FOR CHANGE

My name is Joe, I am an addict and this is my story.

I was born and raised in Stratford in a very loving and caring family. I had everything you could want and was described as a very happy young boy. At 5 that changed abruptly. My grandfather who I was very close to died. I had no ability to understand this or how to grieve. My mother believes I became clinically depressed at that point.

I had no appropriate coping skills so I over ate, I acted out, I bullied people and eventually I discovered drugs and alcohol. Through high school I found every excuse to drink or use marijuana and experimented with other drugs. After graduation I was unmotivated. I worked at a couple of factories, living paycheck to paycheck, drinking and using.

At the age of 23 I owned my own house, but then I was introduced to cocaine and using took over. I lost my job and fell deeper into the drug culture. In the following year cocaine turned to crack cocaine and then my first arrest. I reached out to Choices for Change. I don't know that I was looking for help with addiction or would have admitted I was an addict, I was looking for help with court. Either way I was given help. I started counselling at that point, and a long term relationship between me and this agency was born.

I managed to stay out of trouble for a while and thought I had myself under control. The reality was I had just substituted the drugs for alcohol. Before long I was introduced to Crystal Methamphetamine. These became the darkest days of my life. My mental health suffered greatly. I developed a social anxiety disorder and my depression was at an all-time low. I fell deep into the drug culture again after the death of my cousin, again not knowing how to grieve. My depression really took hold of me and the drugs were my only way out. I was lost and floating through the system for a long time; social assistance, counselling, homelessness, unemployment...there was no traction in my life. When my father died, I really fell apart. I had significant legal problems, was stuck in the denial of my addiction and felt hopeless, and for a few more years I couldn't accept the help I truly needed and was right in front of me. I was lying to myself and therefore, lying to others. My life was truly unmanageable.

On April 12, 2013 I finally hit my rock bottom and for whatever reason was finally able to accept the help that had been offered the whole time. I went to Choices for Change for 12 years on and off before I was able to break through my own deception and begin to heal. I went to withdrawal management, followed by residential treatment, and came home to two amazing groups of people, who had never given up on me. First is my loving family for whom I am eternally grateful, and the other is the staff at Choices for Change. I enrolled in the Addiction Services Initiative program through Ontario Works and for the first time truly engaged in my own life and healing. I engaged in one-to-one counselling as well as different groups including Shared Experience, Leisure and Mindfulness.

Through my work with Choices for Change and other community supports, I was

able to find hope and set goals. I studied at McMaster University and received an Addictions Care-Worker Diploma. I began working in the field of addictions and in a short period of time was able to fulfill a goal that I didn't know was possible, I was offered a position at Choices for Change. I began as a Relief Youth Outreach worker in the Crossing Bridges program and am now a regular staff member at the Listowel site for Crossing Bridges.

I am so happy to be part of this team and have an opportunity to give back to an organization and community that gave me so much. On April 12th, I celebrated 4 years of recovery and a life that I never knew I could have. I am happy to report that I am in excellent mental health these days and the thought of using drugs is not part of my life. I have the tools to deal with life and I'm doing just fine!

RESILIENCY IN MENTAL HEALTH

The thought of writing this leaves me feeling anxious and uncertain. Why? Because I question all my abilities, my ideas and my competence to do it right I thought, though that I would start with the definition of "Resiliency". It is "the ability to spring back; returning to the original form or position after being bent, compressed or stretched". In the case of mental health, this means bouncing back from thoughts of insecurity, the feeling of exhaustion and the fear of inadequacy.

Thoughts of insecurity drill into me daily. Low self-esteem runs rampant amongst those of us who struggle with Mental Health Issues. We break ourselves down by telling ourselves we're useless, ugly and old. We continuously stretch our minds into distortions that we're different, strange and stupid. It's even difficult for me to admit that

these thoughts are distortions. I've been taught that by the many groups I attend for mental healthier sufferers.

Attending groups and individual therapy on a regular basis is my life now. And it's not easy. We learn something, then try and practice it in the 'real world' which sucks the life and energy from within. To constantly battle against my own thoughts and try to trick myself into thinking they are contradictory to facts an be incapacitating. Imagine having to question every thought you have It is debilitating and sometimes humiliating. Still we - more often than not get up and face every day with as much energy as we can gather, frequently smiling when we'd rather be crying, or 'doing something' when we'd rather just stay on the couch or go to bed. That's why you may hear of someone who just **CONTINUED ON PAGE 5**

BLACKCREEK

HURON WOMEN'S SHELTER SECOND STAGE HOUSING AND COUNSELLING SERVICES



Victims and Survivors of Crime Week

Empowering Resilience



Huron Domestic Assault Review Team Presents

Fran Odette

Wednesday, June 7rd 2017
8:00am
Knights Of Columbus
Goderich, ON
Free Admission

For more information: 519-788-5504 dart@huronwomensshelter.ca





In January 2017, the Ministry of Seniors Affairs, Elder Abuse Ontario and Western University launched a provincial initiative called, It's Not Right, to educate Ontarians as bystanders to the abuse of Older Adults. Bystanders are neighbours, friends and family members who can be the first to see the warning signs of abuse, but may not know how to respond.

Research on bystander engagement has shown that with the right education and support, neighbours, friends and family members can become responders who provide information about where to find help as well as critical support for friends and loved ones who may be experiencing abuse.

Abuse of Older Adults can take many shapes and forms, we know it happens in Huron and Perth counties far too often. Taking a moment to learn about the warning signs and how you could help someone or a family experiencing abuse is an important step!

Here are the ways you can find out more or find help in our area:

- Visit: www.itsnotright.ca or http://www.el-derabuseontario.com/
- Host a trained It's Not Right Speaker for a one hour learning session in your workplace, community club, or social group. To connect with a facilitator in your area contact Garry in Perth at stopvaw@wightman.ca or in Huron at dart@huronwomensshelter.com there are several trained speakers available in both counties at no cost to you.
- Download resource materials and distribute them in your business, to your family or anyone. They are free and a handy reference guide. Find them all here: http://itsnotright.ca/brochures

• Contact the provincial seniors safety phone line if you need access to any resources: 1-866-299-1011

People of all ages can recognize warning signs of abuse and know how to respond safely and effectively. Together we can end the abuse of older adults in Huron and Perth Counties.

If you or someone you love is experiencing any type of abuse call a confidential Support and Information Line to talk to a trained counsellor, available 24 hours a day, 7 days a week. In Perth call 1-800-265-8598 or in Huron call 1-800-265-5506.

CONTINUED FROM PAGE 4 -

wants to be alone or naps many times throughout the day. We're recharging, regaining our energy for the next big step.

Finally, although not conclusively, we endeavor to engage ourselves in a new adventure that might be something as simple as taking a walk or as complicated as returning to work. This is when our fear of inadequacy raises its ugly head and engulfs us in uncertainty. I can't do this. What if someone sees me? They'll know I'm not working and will judge me. Will I be well enough and good enough to return to a job that holds so much stress? What if I fail – again? What will people think? We are so worried about being judged that we judge ourselves before we even begin. We break ourselves down and fear our weaknesses will be lit up by a spot-light and everyone will be able to see our imperfections, incompetence and inadequacy.

We need to build ourselves up, straighten ourselves out and put the broken pieces back together. We need to do this over and over again. We have to 'practice living' every day. We have to challenge our thoughts and change our beliefs into something we struggle to believe It takes resilience to live through each day and come back the next to fight again.

J. E. Badham



Alcohol, Drug & Gambling Counselling Centre

10 Downie Street, Festival Square Building, 3rd Floor Stratford, Ontario N5A 7K4 519-271-6730 or 1-877-218-0077

PROVIDING SAFE AND CONFIDENTIAL SUPPORT TO THOSE WITH ADDICTION AND/OR MENTAL HEALTH CONCERNS

HELPING OUR CHILDREN TO SELF-REGULATE AT HOME

By Carissa Kanters, Public Health Promoter

What is self-regulation?

A quick Google search will turn up many different definitions for this term, however, at its core self-regulation is a person's ability to be calm, focused and alert.

Self-regulation is now a commonly used term in schools. In fact, it's mentioned over 30 times in Ontario's kindergarten curriculum alone. Teachers and school staff are keenly aware of the fact that optimal learning occurs when students are calm, focused and alert. In fact some studies are showing that a child's ability to self-regulate is a better predictor of school success than IQ (Shanker, Stuart. The Self-Regulating Student).

To enhance self-regulation, some Ontario classrooms are reducing clutter and toning down bright lights so that there is less visual stimuli for students. Others are providing fidget toys and movement breaks so that students can expel extra energy that might otherwise distract them from the task at hand. Evidently, schools see the value in providing children the opportunity to develop these self-regulation skills in the classroom.

There are many things that you can do at home to help your child develop their ability to self-regulate at any age:

Help your child to understand their emotions and level of arousal

• Children need to develop an awareness of their arousal level before they can understand when and why to use strategies for self-regulation.

• Discuss feelings and emotions with your child regularly. Name what they are feeling and discuss how it feels.

• For more information on helping your child to develop self-awareness, click on the article, "What's all this Talk about Engines." http://alertprogram.com/documents/WhatsAllThisTalkAboutEnginesEnglish.pdf

• Co-Regulate with your Child

 \bullet We are not born with the ability to self-regulate. It's a skill that is learned through social interaction.

• Children learn many of these skills through us as we soothe them, help them to deal with difficult emotions and situations, and provide a sense of security, safety

and well-being.

• Your own self-regulation can have a very positive impact on your child. Children will learn from seeing you model strategies to calm yourself or cope with a tough day.

• For more information on co-regulation click here: http://www.scholastic.com/parents/resources/article/social-emotional-skills/developing-self-regulation

\bullet Be aware of "The Big Three: Sleep, Nutrition and Physical Activity" in your child

 Current Canadian guidelines recommend 60 minutes of physical activity for children every day.

• Canada's Food Guide supports a balanced diet based on the four food groups.

• Children in elementary school need between 10-12 hours of sleep per night. Self-regulation expert Stuart Shanker argues that beyond the number of hours, the quality of sleep also matters. He recommends limiting large snacks and screen time before bed, to help facilitate deep and restorative sleep.

• Providing healthy food choices, opportunity for adequate physical activity and an established sleep routine (e.g. consistent bedtime) can set the stage, making it easier for children regulate more effectively.

For more information on each topic, please see the links below:

Nutrition (Canada's food guide) http://hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php; Healthy Eating for Children http://www.pdhu.on.ca/health-topics/healthy-eating/children/

Sleep http://keltymentalhealth.ca/healthy-living/sleep

For more information about self-regulation:

Canadian Self-Regulation Initiative http://www.self-regulation.ca/

The MEHRIT Centre http://www.self-reg.ca/shanker-self-reg/ http://www.self-reg.ca/shanker-self-reg/self-regknowledge-series/



ADVERTISING

Mental Health AWARENESS WEEK SYMPTOMS OF POSTPARTUM DEPRESSION

For many women, the joy of welcoming a new baby into the world is enough to overlook all of the sacrifices and physical changes they must make and go through while pregnant. While that joy is unrivaled, women dealing with postpartum depression may find their initial weeks or months of motherhood are not how they imagined they would be prior to giving birth.

Women suffering from postpartum depression, a mood disorder that affects women after childbirth, often deal with extreme feelings of sadness that interfere with their ability to care for themselves, their families and their new babies.

According to the National Institute of Mental Health, there is no single cause of postpartum depression, which is likely the result of a combination of factors, some of which are physical and others that are emotional. The NIMH points out that postpartum depression does not result from something a mother does or does not do, but may be traced to hormonal changes in a woman's body that occur after giving birth. After childbirth, a woman's estrogen and progesterone levels quickly drop, potentially triggering mood swings. When coupled with the inability to get adequate rest that many women experience after childbirth, these hormonal changes can contribute to symptoms of postpartum depression.

Recognizing postpartum depression is not always so simple. For example, many women experience feelings of exhaustion after giving birth, but that does not mean they are suffering from postpartum depression. The following are some of the

more common symptoms of postpartum depression, courtesy of the NIMH.

• Feeling sad, hopeless, empty, or overwhelmed

• Crying more often than usual or for no apparent reason

Worrying or feeling overly anxious

• Feeling moody, irritable or restless

• Oversleeping or being unable to sleep even when her baby is asleep

• Having trouble concentrating, remembering details and making decisions

• Experiencing anger or rage

• Losing interest in activities that are usually enjoyable

• Suffering from physical aches and pains, including frequent headaches, stomach problems and muscle pain

• Eating too little or too much

· Withdrawing from or avoiding friends and family

Having trouble bonding or forming an emotional attachment with her baby

• Persistently doubting her ability to care for her baby

• Thinking about harming herself or her baby

While those are common symptoms of postpartum depression, women and their families should recognize that not all womens' experiences with postpartum depression will be similar. Only healthcare providers can diagnose postpartum depression, and women or their loved ones who suspect the disorder might be affecting them or their loved one should consult a physician right away. More information is available at www.nimh.gov.

A MOTHER'S JOURNEY -

We all want the best for our children and you want to teach them the proper values that they need in order to succeed in life. However there are many children that need that extra help, support and guidance just to make it through the day. This is no easy task speaking as a parent who has a child with multiple exceptionalities. With our limited resources, long waiting lists, and a weak support school system I can honestly see how these children can fall through the cracks in our society. Mental Illness, disorders, and intellectual disabilities are the major setbacks that these children are faced with every day. The stigma and bullying that comes along with this is daunting. There is need for empathy and understanding and the more that the community understands about the issues and the impact of stigma the better. Over the years I have educated myself through countless workshops and con-

ferences learning on how to support my child and others. With the support of CPRI and the Huron Perth Centre it has given me the tools that I need in order for my child to succeed throughout his school years. This journey has been an eye opening experience for myself and my family. The importance of advocating for these children is so vitally important. We need to understand, support and show them that we do care, they can succeed and grow up to be accepted by their peers in a positive way. I am a member of the advisory board at CPRI and I understand the complex challenges and the great need of change that needs to be done. I have also chosen to serve on the board of directors at the Huron Perth Centre because I believe that everyone needs a voice. To advocate for them when they cannot do it for themselves and provide input when needed, because ALL children are our future.

ADVERTISING

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AWARENESS WEEK APRIL 30 - MAY 6 • 2017

Huron Perth Mental Health & Addiction Information Fairs!



- Find out more about the Mental Health & Addiction Programs available in Huron & Perth
- Meet with Program Staff and Agency Leads
- Network with other Community Mental Health & Addiction Clinicians to Create New or Build on Existing Relationships
- Learn About the Work Being Done to Enhance Mental Health & Addiction Services in Your Community and Celebrate Mental Health Week with Others!

TWO Dates/Locations to choose from! Monday, May 1, 2017 at the Huron Family Health Team 32 Centennial Drive, Seaforth, from 1:00-3:30pm

Thursday, May 4, 2017 at the Stratford Rotary Complex Community Room C from 10:30am-12:30pm

Sponsored by members of the Huron Perth Mental Health &



Addictions Network*





1-877-218-0077 519-271-6730



Stratford Listowel Clinton

519-273-3373 519-291-1088 519-482-3931



ALL GENERAL INQUIRIES AS WELL AS THE: Sexual Abuse Treatment Program Eating Disorders Program Day and Evening Programs Pastoral Care 519-272-8210 ext. 2570

> **Huron Perth Helpline & Crisis** Response Team 1-888-829-7484 Stratford General Hospital Mental Health Inpatient Unit 519-272-8210 ext. 2479

Primary Health Care Nurse Practitioner Program 519-527-8421 ext. 4800

Huron Perth Seniors Mental Health 1-866-527-8421 ext. 4821

Huron Perth PEPP 1-866-527-8421 ext. 4813

Huron Perth Assertive Community Treatment Team 1-866-527-8421 ext. 4815

Huron Perth Community Treatment Order Program 519-527-8421 ext. 4800

Listowel Mental Health 519-291-1320



Helping you to health yourself

Mary Atkinson Executive Director **North Perth Family Health Team** 519-291-3125 Ext. 6273

Your Local Family Health Team

Clinton FHT 519-482-3000 Bluewater FHT. 519-236-4314 Happy Valley FHT 519-284-3450 Huron community FHT . . . 519-600-2273 Maitland Valley FHT 519-524-6060 North Huron FHT 519-357-3930 North Perth FHT 519-291-4200 Star FHT. 519-273-1060 Stratford FHT 519-273-7017



Primary Health Care Nurse Practitioner Program

Providing Primary Care for those with Mental Health and Addiction concerns and the Complex Frail Elderly

519-527-8421 ext. 4800









ALEXANDRA MARINE AND GENERAL HOSPITAL

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519-524-8323 Ext. 5361 519-524-8316 or 1-877-695-2524

Community Psychiatric Service • Huron Perth Clinical Intensive Case Management Huron Outreach Eating Disorders Program

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Alzheimer Society Huron 1-800-561-5012

Alzheimer Society Perth 1-888-797-1882

Canadian Mental Health Association Mental health for all

with services in Exeter and Goderich

CMHA Middlesex Exeter & Goderich Sites 519-235-0335

149B Thames Rd. W. Exeter. Ontario NOM 1S3



519-646-6100 www.sjhc.london.on.ca





Huron Perth Helpline & Crisis Response Team Toll Free #: 1-888-829-7484



Soutien en cas de troubles du comportement en Ontario du Sud-Ouest



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Association canadienne

Huron-Perth Branch 519-273-1391