

**STIGMA** IS ONE OF THE BIGGEST BARRIERS TO TREATMENT AND RECOVERY FOR SUBSTANCE USE DISORDERS TODAY. OFTEN THE LANGUAGE WE USE CONTRIBUTES TO STIGMA.

THERE ARE A LOT OF STIGMATIZING WORDS THAT ARE COMMON IN OUR DAY-TO-DAY LANGUAGE.

## WHAT YOU SAY

ABUSER  
DRUG HABIT  
ADDICT  
DRUG USER

VS

## WHAT PEOPLE HEAR

IT'S MY FAULT  
IT'S MY CHOICE  
THERE'S NO HOPE  
I'M A CRIMINAL

BY CHOOSING ALTERNATE LANGUAGE, YOU CAN HELP BREAK DOWN THE NEGATIVE STEREOTYPE ASSOCIATED WITH SUBSTANCE USE DISORDER.

## INSTEAD OF

ABUSER, ADDICT  
DRUG HABIT  
FORMER/REFORMED ADDICT

## TRY

PERSON WITH A SUBSTANCE USE DISORDER  
REGULAR SUBSTANCE USE, SUBSTANCE USE DISORDER  
PERSON IN RECOVERY/LONG-TERM RECOVERY

THINK BEFORE YOU SPEAK. HELP REMOVE **THE STIGMA**.

JOIN THE **CONVERSATION**

#WORDSMATTER



Canadian Centre  
on Substance Use  
and Addiction

Evidence. Engagement. Impact.

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# Safer Drinking Tips During COVID-19



During the global Coronavirus (COVID-19) pandemic you may have difficulty accessing alcohol. Liquor stores may limit hours and/or numbers of people in the store, move to delivery only, and/or stop accepting cash.

## Making a plan for safer drinking in case of reduced alcohol availability

Safer drinking during COVID-19 can include planning to:

- planning to drink your regular amount, but spreading it out over time to reduce bingeing and withdrawal
- slowly reduce the amount you drink each day,
- drinking lower alcohol content drinks such as beer instead of wine or wine instead of spirits, or
- taking a break from drinking after slowly reducing.

## Before making a plan, know your risk of serious alcohol withdrawal

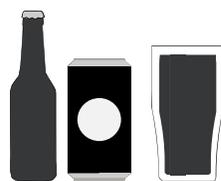
Everyone is different but for some people who drink very heavily, stopping all at once or cutting down too fast can be dangerous. To make a plan, ask yourself:

1. Do I drink more than one bottle of spirits per day, or equivalent? (about 3 bottles of wine or 15 bottles of beer?)
2. Have I ever had a seizure from alcohol withdrawal before?
3. Have I ever had hallucinations (seeing or hearing things that aren't real) from alcohol withdrawal before?
4. Do I usually shake, sweat, and feel nauseous or vomit as soon as I wake up in the morning?

If you said “yes” to any of these questions, you are considered to be at **high risk** of withdrawal seizures.

If so, do not stop drinking suddenly unless you have been prescribed medication to relieve withdrawal. Cut down = gradually by no more than one or two drinks per day.

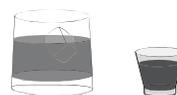
For these guidelines, “a drink” means...



BEER/CIDER/COOLER  
341mL (12oz)  
5% alcohol content



WINE  
142mL (5oz) glass  
12% alcohol content



DISTILLED ALCOHOL  
(rum, vodka, gin, etc)  
43mL (1.5oz) glass  
40% alcohol content

Alcohol strengths may vary from product to product so check the % of alcohol by volume listed on the container.

## Know the amount of alcohol you drink

You may have to switch your preferred type of alcohol based on what is available. To make sure you are not drinking too little or too much, you can convert the amount of your drink of choice to an equal amount of another drink. See the “Counting Your Drinks” Poster for more information.

For example:

- One 26 oz/750 ml of 40% spirits = 17.5 drinks
- 1 bottle of 12.5% wine = 5.5 drinks
- 1 can of 8% beer = 1.5 drinks

## Managing or reducing your drinking safely

Consider having a trusted friend or family member help you manage your alcohol supply so you do not go through it too quickly. This could include them keeping a back up supply in case access becomes more difficult in the future.

If reducing, make a goal. Think about how much you drink now and where you want to be. Keep this goal realistic for you.

### Pace and space out your drinks

- Decide how much you think you will need to stay comfortable for the day and set that amount aside.
- Keep a schedule and track your drinks. Pour one drink at a time of spirits or wine into a cup or reusable bottle. Set aside beer can tabs, mark your bottles, or make a tally of how many drinks you’ve had. Slow down if you find you’re getting intoxicated quickly or drinking more than usual.
- Dilute your drinks with water or juice or have ‘drink spacers’ by alternating with water or juice.

Consider switching to drinks with less alcohol per volume. Drinking beer instead of wine, or wine instead of hard liquor, can help you to pace yourself more easily.

Do not share drink containers or glasses as COVID-19 can be transferred this way.



## Buying alcohol

Consider moving away from cash. If you have resources you may wish to buy gift cards or prepaid credit cards, or set up a bank account. Stores may not accept cash.

**Try to set up alcohol delivery through the store, a support/outreach worker, or a friend.** Consider designating one friend to buy alcohol for a group. It will be easier to manage your consumption if you have frequent deliveries of smaller amounts, for example enough for one day.

**If you are in isolation or quarantine and cannot go to the store,** contact someone who can deliver the alcohol to you or connect you by phone to a doctor if you need help with withdrawal.

## Medications

There are medications available that can help with symptoms of withdrawal and craving, ask your doctor.

## Need help to make a safer drinking plan or help for withdrawal?

- Contact your doctor or a clinic for a phone appointment to get help with withdrawal. It can be possible to withdraw from alcohol at home.
- Contact an addiction medicine clinic. They may be able to help you with a plan or prescribe medication.
  - The phone # for the addiction medicine clinic in your community is \_\_\_\_\_
- Contact your support worker, nurse or outreach team to help make a plan.
- Call 811 if you are having withdrawal but are unsure if you should go to the hospital.
- Call 911 if you have: sudden chest pain, shortness of breath, or difficult breathing, OR if you are in severe withdrawal (shaking and sweating a lot) and have a history of seizures.

We would like to thank the members of the Eastside Illicit Drinkers Group for Education (EIDGE).

# Administering Naloxone during COVID-19



**CALL** 9-1-1\*. **WEAR** disposable gloves. **ADMINISTER** naloxone. **TILT** the person's face to the side or cover their mouth with a mask in case they cough



Chest compressions and/or the recovery position are **RECOMMENDED**



Rescue breaths are **NOT RECOMMENDED** at this time



**WASH** your hands with soap and water when done assisting

\*The Good Samaritan Drug Overdose Act provides some legal protection for people who experience or witness an overdose and call 911 or their local emergency number for help.

**S**uspect an  
**O**VERDOSE?  
**S**tay and

**CALL 911**

or your local emergency number

The Good Samaritan law can protect you from simple drug possession charges.

Together we can **#StopOverdoses**

**KNOW  
MORE**

DRUGS: GET THE FACTS.  
KNOW THE RISKS.

Learn more at [Canada.ca/Opioids](https://Canada.ca/Opioids)



Government  
of Canada

Gouvernement  
du Canada

Canada

# FENTANYL



## THE SILENT KILLER

Fentanyl is a powerful prescription painkiller that is now being produced, imported and sold illegally with tragic consequences.



Mixed with drugs like heroin and cocaine



Used in fake prescription tablets



Odourless, tasteless, can't be detected



About 100 X more toxic than morphine



Exposure (touching or inhaling) can kill



2 mg (size of four grains of salt) can kill

### Overdose signs may include:

- Shallow breathing
- Blue lips and nails
- Unresponsiveness
- Gurgling or snoring
- Cold, clammy skin
- Tiny pupils



If you suspect an overdose, **call 911 immediately.**

For more information visit the RCMP Centre for Youth Crime Prevention website

1

## Harm Reduction enables risk-taking behaviors

- ♥ Harm Reduction **acknowledges personal autonomy** and **empowers individuals** to take ownership of their health.
- ♥ People who access Harm Reduction services are **30-35% more likely to access treatment** services.
- ♥ Harm Reduction services are known to **significantly decrease incidence of overdose, HIV/hepatitis C infection, sepsis, mental health crises, and sexually transmitted infections (STI)**.

2

## Harm Reduction is costly to the public health system

- ♥ Harm Reduction is a **cost-effective public health intervention**.
- ♥ Harm Reduction initiatives like supervised consumption and take-home naloxone **reduce EMS call-outs and emergency department visit rates**.
- ♥ The estimated economic cost of HIV treatment over a lifetime in Canada is **1.3 million dollars/person**. The cost of a sterile needle is **less than 10 cents**.



# Myth Busters: Harm Reduction

3

## Harm Reduction creates public disorder

- ♥ Research has shown Harm Reduction initiatives **decrease public injection drug use** and **publicly discarded needles**.
- ♥ Harm Reduction services are implemented to **address existing issues** in communities, not to create them.
- ♥ Studies from Insite show supervised consumption services **do not create the 'Honey Pot' effect**.

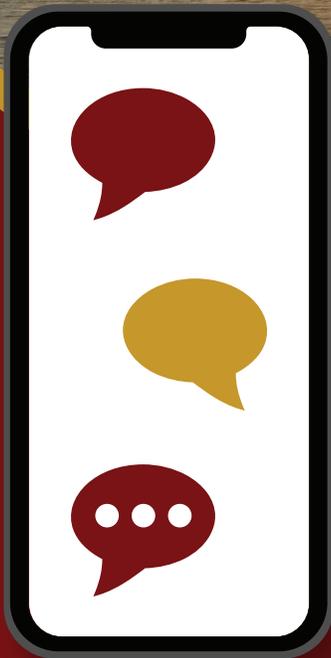
4

## Harm Reduction is just needle exchange, condoms, and naloxone

- ♥ Harm Reduction is **both a series of services and an underpinning philosophy that should be applied in all care settings**.
- ♥ Harm Reduction is also seat-belt checks, lifejackets, carseat clinics, nicotine replacement, managed alcohol programs, and much more.
- ♥ Harm Reduction is a way of **establishing relationships and rebuilding trust**--it **fosters connections** to services like housing and primary care.

# NAN HOPE

Nishnawbe Aski Mental Health and Addictions Support Access Program



**We're here for you 24/7**  
**1-844-NAN-HOPE**  
**(1-844-626-4673)**



Navigation to mental health and addictions support services



Rapid access to clinical and mental health counselling



24/7 toll-free rapid access to confidential crisis services

Phone | Text\* | Chat\*

[www.nanhope.ca](http://www.nanhope.ca)

\*Text and Live Chat support are available Monday through Friday: 8:00am – 12:00am ET.

# Managing Withdrawal during COVID-19



## Supporting our wellness during COVID-19

This fact sheet is part of Thunderbird Partnership Foundation's commitment to provide culturally-grounded and strength-based supports for First Nations people during COVID-19. These resources can provide guidance as our communities navigate the current global health crisis, while continuing to face existing health challenges, including substance use and mental health issues.

Colonization and residential schools have contributed to higher rates of mental health and substance use issues for First Nations compared to the general population in Canada.

Prolonged use of (opioid) drugs changes the way our brain functions. COVID-19 may affect drug access, which can cause extreme withdrawal symptoms, such as unbearable pain, nausea, and anxiety.

People become dependent on these drugs in order to avoid withdrawal symptoms and sometimes don't realize they've become dependent. They may mistake withdrawal for symptoms of the flu or another condition.

The symptoms will depend on the level of withdrawal. Multiple factors determine the extent of the symptoms and everyone experiences opioid withdrawal differently. However, there's typically a timeline for the progression of symptoms.

### EARLY SYMPTOMS OF WITHDRAWAL

- muscle aches
- anxiety
- runny nose
- insomnia
- restlessness
- watery eyes
- excessive sweating
- yawning

Withdrawal symptoms can also intensify after day one. Some people can experience diarrhea, abdominal cramping, goose bumps, nausea and vomiting, dilated pupils and blurred vision, rapid heartbeat and high blood pressure.

### HOW TO TREAT MILD WITHDRAWAL

- acetaminophen (Tylenol), or aspirin or other Non-steroidal Anti-Inflammatory Drugs, such as Ibuprofen
- drink plenty of fluids with electrolytes such as vitamin water, or sports drinks (Gatorade)
- treat diarrhea with over the counter medications such as loperamide (Imodium)
- consider a prescription for hydroxyzine (Vistaral or Atarax), cannabis or over-the-counter medications such as Benadryl or Pepto-Bismol to treat nausea
- more intense withdrawal symptoms may require a prescription for clonidine (non-addicting medication) to reduce intensity of symptoms

If you use opioids in a harmful way, COVID-19 may affect your normal supply lines: travel/border restrictions, community check points and curfews.

**Be prepared for involuntary withdrawal and have a plan that reduces harm to you and others.**

1. Find a safe alternative supply source to prevent withdrawal.
2. Get medical and, or treatment help (i.e. drug substitution programs).
3. Contact a First Nations treatment facility near you.
4. Have all necessary medications, food and drinks (especially protein-based and electrolyte boosting liquids).
5. Reach out to Knowledge Holders for cultural supports.
6. Wean off of opioids and other drugs; similar steps can be taken to manage withdrawal for other drugs.

### REFERENCES

**Yale Division on Addictions. (2020)** Coronavirus (COVID-19) Guidance: Patients Engaged in Substance Use Treatment. Yale School of Medicine.

[medicine.yale.edu/intmed/genmed/addictionmedicine/Patients%20Yale%20ADM%20COVID-19%20Guidance\\_032620\\_380628\\_5\\_v2.pdf](https://medicine.yale.edu/intmed/genmed/addictionmedicine/Patients%20Yale%20ADM%20COVID-19%20Guidance_032620_380628_5_v2.pdf)

**Thunderbird Partnership Foundation. (2011)** Honouring Our Strengths: A Renewed Framework to Address Substance Use Issues Among First Nations People in Canada. Thunderbird Partnership Foundation. [thunderbirdpf.org/hos-full](https://thunderbirdpf.org/hos-full)

**Thunderbird Partnership Foundation. (2017)** Opioids 101: Information you can use. Thunderbird Partnership Foundation.

For more information, visit: [thunderbirdpf.org/covid-19](https://thunderbirdpf.org/covid-19)

# Harm reduction during COVID-19



## Supporting our wellness during COVID-19

This fact sheet is part of Thunderbird Partnership Foundation's commitment to provide culturally-grounded and strength-based supports for First Nations people during COVID-19. These resources can provide guidance as our communities navigate the current global health crisis, while continuing to face existing health challenges, including substance use and mental health issues.

Forces of colonization have displaced the First Nations' worldview and their ways of living and maintaining mental wellness.

As such, many First Nations Peoples face major challenges that continue to affect their health and wellness. In this context, mental health and substance use issues continue to be some of the more visible and dramatic symptoms of the underlying challenges. (Thunderbird, 2015)

### SAFER DRUG USE TIPS

- ✗ **DO NOT** share supplies
  - cigarettes, joints, pipes, injecting equipment, containers for alcohol, utensils
- ✗ **AVOID** close contact and try to stay 2 metres, or 6 feet from your buddy to avoid passing the virus
  - using with a buddy is safer than using alone
- › **DO** wash your hands or use wipes before preparing, handling or using your drugs
- › **DO** prepare the drugs yourself
- › **DO** cough or sneeze into your elbow or use tissue
  - throw away immediately and wash your hands
- › **CLEAN** surfaces with soap and water, alcohol wipes, bleach or hydrogen peroxide before preparing drugs if possible
- › **DO** check in on those who may need extra support
- › **STOCK UP** on harm reduction supplies (new syringes and safe use supplies)
  - get enough gear for 2-4 weeks, to last thru self-isolation, program closures
- › **STOCK UP** on meds
  - ask your doctor for a month's supply of medications if possible
  - ask the pharmacy about their plan for methadone, suboxone, kadian or safe supply
- › **PREPARE** for a drug shortage, or loss of access during COVID-19
  - your dealer might get sick

## How to Respond to an Overdose during Coronavirus

British Columbia Centre for Disease Control (2020) recommends the following to respond to an overdose during COVID-19:

1. Try to rouse the person during an overdose by encouraging them to take deep breaths.
2. Call 911.
3. Wear gloves.
4. Give rescue breaths using face shield in naloxone kits (the face shield has a one-way valve and large impermeable area that protects from respiratory secretions).

**CALL 9-1-1** and continue to follow the **SAVE ME** steps: Stimulate, Airways, Ventilation, Evaluate, Medicine, Evaluate

### Possible 911 delays

Emergency services might be slower during a coronavirus outbreak. Try to lower your OD risk. Start low and go slow, stock up on naloxone, and use the naloxone kit plastic face mask if you're giving mouth to mouth.

### REFERENCES

- Thunderbird Partnership Foundation. (2015).** *First Nations Mental Wellness Continuum.* National Native Addictions Partnership Foundation. Retrieved from: <https://thunderbirdpf.org/fnmwc-full>
- Harm Reduction Coalition. (2020).** *COVID-19 Guidance for People Who Use Drugs and Harm Reduction Programs.* Retrieved from: <https://harmreduction.org/miscellaneous/covid-19-guidance-for-people-who-use-drugs-and-harm-reduction-programs/>
- British Columbia Centre for Disease Control. (2020).** *BC Overdose Prevention Services Guide.* Retrieved from: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/priority-populations/people-who-use-substances>

For more information visit: [thunderbirdpf.org/covid-19](https://thunderbirdpf.org/covid-19)

**The law does provide protection against charges for**

Possessing drugs for your own use

Violating conditions of your parole, bail, probation or conditional sentence for a **simple drug possession charge**

**The law does not provide protection against charges for**

Selling illegal drugs (trafficking): Police may suspect this if you have a large amount of drugs, cash or items like scales, baggies, and debt lists

Offences other than drug possession

Any outstanding arrest warrants

Violating conditions of your parole, bail, probation or conditional sentence for an **offence that is not simple possession**

Endorsed by the Ontario Association of Chiefs of Police.

**Disclaimer:** This is legal information — not legal advice.

If you need legal advice, please consult a lawyer about your situation.



**See an overdose? Call 911 immediately.**

Under Canada's *Good Samaritan Drug Overdose Act*, if you seek medical help for yourself or for someone else who has overdosed, neither of you will be charged for possessing or using drugs, nor will anyone else at the scene.

See the other side of this card to know exactly when the Good Samaritan law will and won't protect you against charges.

**Police may not always know about the law's protections.**

If you need legal help, call

**1 (800) 668-8258 (toll-free)** for Legal Aid Ontario or

**1 (855) 947-5255 (toll-free)** for Law Society Referral Service,

also online at <https://lsrs.lsuc.on.ca/lsrs>.

## Témoign d'une surdose? Appelez le 911 immédiatement.

Grâce à la *Loi sur les bons samaritains secourant les victimes de surdose*, au Canada, si vous utilisez des secours médicaux pour vous ou une autre personne, en situation de surdose, ni vous ni l'autre personne ne serez accusé de possession ou de consommation de drogues, ni personne qui est sur les lieux.

Consultez le verso de cette carte pour savoir exactement dans quelles circonstances la loi sur les bons samaritains vous protège, ou pas, contre des accusations.

**Il peut arriver que des policiers ne soient pas au courant des protections qu'offre cette loi.**

Pour recevoir de l'assistance juridique :

**1 (800) 668-8258** (sans frais d'interurbain) pour l'Aide juridique Ontario; ou  
**1 (855) 947-5255** (sans frais d'interurbain) pour le Service de référence du Barreau,  
qui est aussi en ligne à <https://lsrs.lsuc.on.ca/lsrs>

### La loi protège contre des accusations de

Possession de drogues pour votre consommation personnelle

Violation de conditions de votre libération conditionnelle, cautionnement, probation ou peine d'emprisonnement avec sursis relativement à une **accusation de simple possession de drogues**

### La loi ne protège pas contre des accusations de

Vente de drogues illégales (trafic) : La police peut soupçonner cette activité si vous possédez une grande quantité de drogues ou d'argent, ou des objets comme une balance, des sachets à fermer ou une liste de personnes qui vous doivent de l'argent

Délits autres que la possession de drogues

Tout mandat d'arrestation en instance

Violation de conditions de votre libération conditionnelle, cautionnement, probation ou peine d'emprisonnement avec sursis relativement à une **infraction autre que la simple possession**

Approuvé par l'Association des chefs de police de l'Ontario.

**Déni de responsabilité** : Ce document offre de l'information juridique — ce n'est pas un avis juridique. Si vous avez besoin d'un avis juridique, veuillez consulter un-e avocat-e au sujet de votre situation.

# COVID-19 and Ceremonial / Spiritual Practices

Participating in ceremonies and spiritual practices can be an important part of First Nations individual, family, and community health. During this COVID-19 Pandemic, people might be wondering how to continue their ceremonial or spiritual practices in ways that also follow public health measures coming from Federal and Provincial public health offices.

These guidelines were developed through consultation with public health professionals, First Nations health professionals and Knowledge Keepers / Traditional Healers.

**Keep up** and do more of ceremonial or spiritual practices that you can do on your own or in your home with your family.

This might include:

Smudging

Praying

Making tobacco ties

Offering tobacco

Harvesting and using medicines following protocols and the guidance of Medicine Teachers.

Drumming and / or singing songs;  
Using your rattles.

Telling or listening to stories and teachings;  
Practicing the language.

Connecting with others for some of these activities virtually using social media like Facebook Live or other platforms like FaceTime or WhatsApp.

Being generous with love, kindness, material items, if you are able.

**Be cautious** with ceremonial or spiritual practices that involve gathering with other people. you might consider doing things with others while keeping in mind the need to keep gatherings to less than 10\* people and maintain physical distance of at least 2 meters between people.

This might include:

Having a pipe ceremony with less than 10 people in an indoor or outdoor area where people can sit 2 meters apart.

Harvesting medicines outside with other people following protocols and teachings.

Going in a sweat lodge alone or with only a couple of family members / close circle.

Delivering material items, foods or other help to elders if you are able. Make sure you wash your hands frequently if you are assisting elders.

\*please note: this number reflects public health requirements and might change

**Hold off** on ceremonial or spiritual practices that include close contact while significant social and physical distancing recommendations are recommended.

This includes avoiding:

Sweat lodge ceremonies with more than just you or a couple of close family / circle members.

Any ceremony that has more than 50 people.

Any ceremony where physical spacing of more than 2 meters can't be maintained.

Any ceremony where feasting involving shared dishes or utensils is occurring.



Thank you to David Blacksmith, Sheryl Blacksmith, Leslie Spillett, Margaret Lavalée, Sherry Copenace, and Mabel Horton for their guidance and teachings.

# Nanaadawejgaazawak Wii-Mnomaadizwad

Mental Health is Health - they are being healed to live a good life, to think healthy, be physically well and have a good heart

## GIIWEDINANG CEDAR, WHITE BEAR

You are spiritually protected in your homelands  
Mnikwen Giizhikaandawaaboo (drink cedar tea)  
Aak'dewin Bimaadziwining (courage in life)  
G'ziigbiig-ninjiin (wash your hands)  
Eat traditional foods  
Express yourself (dancing and drum)  
Zoongide'ewin (courage)  
Land-based learning (hunt, fish, trap)  
Sleep well, good dreams

Physical

## NINGAABIWNANG SAGE, THUNDER BEINGS & WHITE BUFFALO

Mkwendan, Gzhaadigen (remember, stay at home)  
Your ancestors love you  
Be gentle to yourself and those around you  
Tell people how much they mean to you  
Spiritually cleanse your home  
Hang medicines where you live  
Walk the land and pick medicines  
We are all in this together

Emotional

## WAABANANG TOBACCO, EAGLE

Kasehstenhsera (Power of the Creator)  
Nam'aadaa (let's pray)  
Share stories, teachings and songs  
Pray for self, others and the world  
Sema Ka-bgidnaa (put your tobacco down)  
Connect with your dreams and visions  
Use your spirit name to guide you  
Zhaawendan Bimaadziwin (love and respect life)

Spiritual

## ZHAAWANANG SWEET GRASS, WOLF

Creator has infinite power, do not fear  
You are loved and prayed for daily  
Miigwech wendam (be thankful)  
Karonkwa (I love you)  
Pkwenezdaa (let's all smudge)  
Skennen (peace)  
Kanikonhri:yo (Good Mind)  
Turn negative thoughts to positive  
Learn your language

Mental

# Mental Health Is Health

Δδρ'β<sup>c</sup>η<σ<sup>sb</sup> Λ<sup>L</sup>ηΔ><sup>sb</sup>

**Inuusiqattiarniq  
pimmariuvuq**

"A good mind, healthy relationships, the person is valued by all the people and has a purpose in the community".

**Inuktitut**

**Nanaadawejgaazawak  
wii-mnomaadizwad**

"They are being healed to live a good life, to think healthy, be physically well, and have a good heart"

**Ojibwe**

Γ<σ<sup>sb</sup> Δ<sup>sb</sup> Γ<σ<sup>sb</sup> Δ<sup>sb</sup> Δ<σ<sup>L</sup>

**Meh-tooh-nen-chi-gun-  
mi-noh-pa-ni-win  
minoh-aya-win-ani-mah**

"Health is being healed mentally, spiritually, emotionally and physically".

**Cree**

**Ata'karitahtshera'nen' ne:'e ne  
Ka'nikonhri':io**

"Clear thinking, good decisions for self, family and community"

**Mohawk**

**La Saantii Kistikwaanihk  
la Saanti**

**"Mental Health Is Health"**

**Michif**

mental  
health  
is  
health

