

Module 6: Coping and Adjustment, Social Work



Life After Stroke Education Series



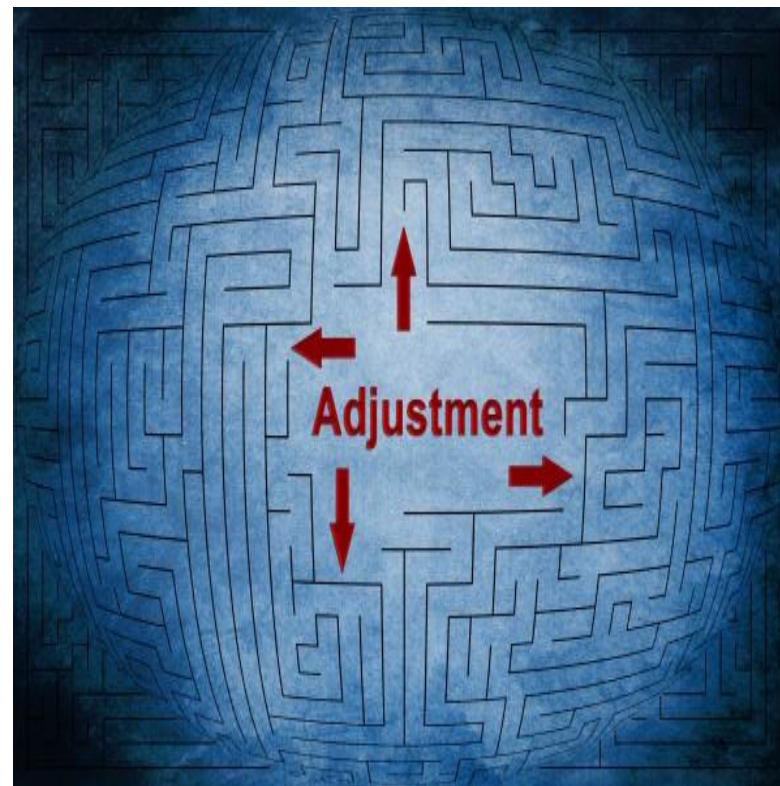
Stroke Network
Southwestern Ontario

Disclaimer

- SWOSN has created the following PowerPoint to support the delivery of stroke education for providers working in the Life After Stroke Programs. SWOSN would like to acknowledge the Community Stroke Rehab Teams for providing the initial iteration of this resource.
- Every effort has been made to ensure that the following information provided is accurate, up-to-date, and complete, but no guarantee is made to that effect. This is a reference resource designed as a supplement to, and not a substitute for, the expertise, skill, knowledge, and judgment of healthcare practitioners. For the most current recommendations always refer to the Canadian Best Practice Recommendations for Stroke Care at: www.strokebestpractices.ca
- Images used in this presentation are for educational purposes only and are not to be duplicated

Outline

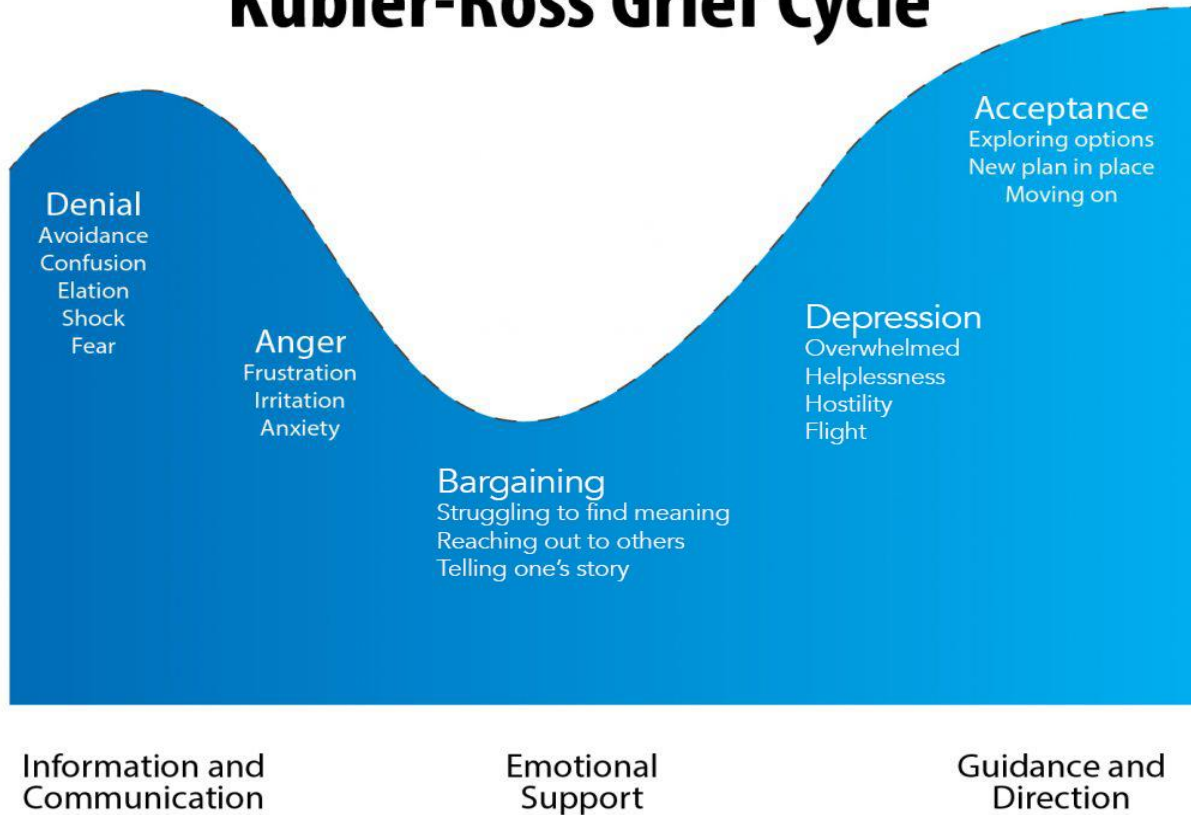
- Grief and Loss
- Anger and Frustration
- Post Stroke Fatigue
- Role Changes
- Depression and Anxiety
- Emotional Liability
- Caregiver Burnout
- Financial Supports





Grief and Loss: Stages of Grief

Kübler-Ross Grief Cycle



- **Denial:** Rejecting disability, believing that others are mistaken, clinging to the belief that things aren't so bad.
- **Anger:** Frustrated at their situation, lashing out at others, asking "why me?" or "how could this happen?"
- **Bargaining:** Hope to avoid grief, negotiating to find meaning, "if I quit smoking, I'll get back to 100%."
- **Depression:** Despair at recognizing magnitude of disability, asking "what's the point?" or "why bother?"
- **Acceptance:** Embrace the future, exploring options, "It's going to be okay" or "I'm just going to do my best, and that's enough."

THE 5 STAGES OF GRIEF

The Kübler-Ross Model ft. Canadian Winters

By: Chrystal Zhang



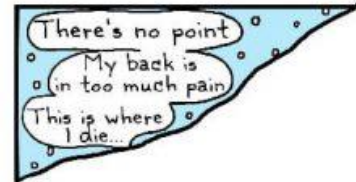
DENIAL



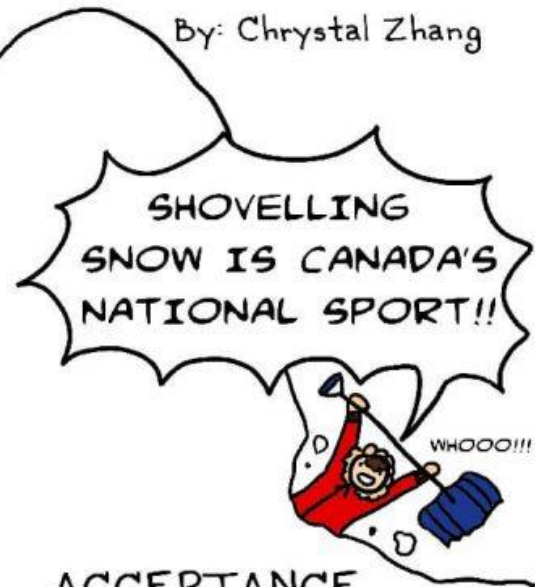
ANGER



BARGAINING



DEPRESSION



ACCEPTANCE

Anger & Frustration: Identify & Understand

- Anger and frustration are common emotions after stroke
- The stroke survivor's emotional filter can change as a result of changes in the brain
- Shorter fuse, lash out at others
- Grief reaction

Common Causes

- Perceived lack of control
- Loss of independence and freedom
- Reliance on other people and feeling like a burden
- Changes in security (ability to work and provide)
- Changes in ability to communicate
- Memory changes (forgetting things)
- Changes in energy (post-stroke fatigue)
- Easy Tasks now difficult
- Loss of family or friends
- Fear

Anger & Frustration: Coping Strategies

- Identify triggers and warning signs
- Take a break or timeout
- Talk to someone and consider seeking professional help
- Get plenty of rest
- Self compassion (be gentle with yourself)
- Count to 10
- Relaxation techniques (i.e. deep breathing)
- Exercise (re-direct anger)
- Journaling
- Distraction

Post Stroke Fatigue

Definition: “A sense of exhaustion or lack of perceived energy, distinct from sadness or weakness ... often accompanied by an aversion to effort”

- Common and experienced by at least half of all stroke survivors.
- Often results in negative impacts on overall mental health wellness and decreased participation in physical, social and professional activities, including rehabilitation

Post Stroke Fatigue: Identify & Understand

Why Does Post Stroke Fatigue Occur?

- Brain is working harder to process information
- Brain runs out of “fuel” faster than previous to the stroke
- A decreased ability of the central nervous system to communicate with the muscles to produce the necessary chemicals (neurotransmitters) in the brain to process information
- Multidimensional – demographics, neurological/physical, co-morbidities, medications, sleep disturbances, pain,
- Pre-stroke fatigue, depression/anxiety, cognitive impairments

Post Stroke Fatigue: Coping Strategies

The “Energy Bank” Strategy

Think of the body’s energy as money in a bank account. Make deposits and withdrawals based on a budget. If you empty the energy account too quickly you will not have the energy you need throughout the day.

Post Stroke Fatigue: Coping Strategies

Improve Sleep Routine

- Set a regular schedule
- Avoid alcohol
- No evening caffeine
- Relaxing routine before bedtime
- Avoid using your phone or other electronic device before bed
- Minimum 20 minutes of daylight everyday

Physical activity

- Regular exercise increases your strength and energy reserves
- Has a positive correlation to mood, sleep and cognition

“The 5 P’s”

- Pacing
- Prioritizing
- Planning
- Positioning
- Prevention

Medication

Intentional Practices

- Meditation / mindfulness
- Breathing techniques
- CBT / DBT based therapy
- Etc.

Role Changes

A dependable way of living with one's spouse has changed... perhaps drastically.

Heavy lifting	Laundry
Yard maintenance	Cooking
Primary income earner	Housekeeping
Household repairs	Shopping
Vehicle maintenance	Childcare

Expectations and definitions are challenged.

Financial management
Intimacy and sexuality
Friendships and social life
Decision making and planning
Compassion and empathy
IDENTITY- Who am I?

Role Changes: Meet Joe

- The comfortable way of life has changed. Imagine Joe. When a stroke happens, it interrupts Joe's normal life. Now even small changes can disrupt Joe's day to day comfort and the ripples disturb the whole family.
 - Discomfort with himself and his world has suddenly landed on Joe like a wet blanket.
 - Little things are not the same. Someone (Joe's partner) may have to help Joe get out of bed, go to the bathroom, and get dressed (and this is even before people have had their coffee!!!).
 - Joe has always been an independent guy, and he hates relying on anyone for assistance. This change is a huge learning curve for Joe.
- Speaking of coffee, Joe can't make the coffee anymore because he has no feeling in his hands and arms. He is also having trouble feeding himself.

Role Changes: Meet Joe

- Joe doesn't know what has hit him! He is used to doing everything for himself, and having anyone hovering over him is something he is having difficulty getting used to. He is getting more **angry** at people just trying to help. He just wants everyone to go away. He wants the old Joe back, and wants his old life back. **After a stroke it can take time to establish a new balance and new ways of sorting through a lot of new limits and challenges. In the meantime emotions can be frazzled.**
- Joe can't drive, so he can't even escape that way! Joe's partner has to drive him everywhere now. Joe is not a happy passenger. Does his partner have to come to coffee with the guys? Will his walker fit in the restaurant?

Role Changes: Meet Joe

- When Joe looks at his yard, who is going to mow the lawn, fix the fence, feed the cows?
- Who is going to do everything??? **After a stroke all roles are up in the air!**
- If Joe was employed, what money will he have to live on? If Joe lives with someone else, they might be able to do his laundry, cooking, housekeeping, shopping and childcare. If he doesn't, he may have to move to a care facility.

Role Changes: Meet Joe

- Every part of Joe's life, everything he always thought he was, has disappeared, and now he feels he is a burden on other people. He feels like everyone has to give to him, and he feels useless.
 - Who am I?
 - What can I do?
 - Who can help?
 - What do I need?
 - Where do I go?



**All of life's expectations, definitions, hopes and dreams
have been put in a blender by the stroke.**

Role Changes: What helps ?

- Developing a **relationship** with Joe and helping him get to know others.
- Going at **Joe's pace** because he may not trust you at first. Asking for permission to talk about difficult subjects or to offer support.
- Taking Joe seriously when he says he doesn't know who he is anymore and helping him be **compassionate** with himself.
- Helping Joe recognize both **the strengths** he has and any recovery he has made no matter how small. Small things add up and need to be celebrated.

Role Changes: What helps ?

- Taking the time to **notice and acknowledge** Joe and giving him the time to talk even if there are a million things to do.
- Showing Joe the **resources** available in the community so his partner doesn't have to do everything. Talking with Joe about what other people have found helpful.
- **Being present.** It is often really tempting to check your phone in a spare moment, but someone like Joe might assume that you have no time for him.
- **Help Joe turn the blender off, even for a few minutes.**

Depression: Identify & Understand

- Feeling sad after a stroke is expected, but treatable
- Approximately 1/3 of all individuals who experience stroke will exhibit symptoms of depression at some time following the stroke event.
- **Depression is treatable.** Encourage talking to a family doctor about pharmacological options and/or referral to a mental health professional.

The Blues Or Sadness

You feel sad or unhappy. (We all feel this way sometimes).

You know why you feel sad or blue (because of a sad event).

You find that the feeling of sadness goes away on its own.

You notice that your sad mood is temporary — it lasts a few days or weeks.

Clinical Depression

Clinical depression is a medical illness.

You do not know why you feel the way you do.

Clinical depression does not go away without treatment.

Clinical depression can last months or years.*

Anxiety: Identify & Understand

Some Stroke Survivors may develop the following:

- **Generalized Anxiety Disorder (GAD):** characterized by excessive worry and anxiety about various aspects of life, such as health, safety, and future functioning.
- **Panic Attacks:** characterized by sudden and intense feelings of fear or discomfort, often accompanied by physical symptoms such as rapid heartbeat, shortness of breath, sweating, trembling, and chest pain.
- **Social Anxiety Disorder:** characterized by an intense fear of social situations or interactions. Worry about how others perceive them, fear embarrassment or rejection, and may avoid social gatherings or activities.
- **Phobias:** An intense, irrational, and persistent fear or aversion towards a specific object, situation, or activity, often leading to avoidance behavior. Can significantly impact mobility and independence, leading to avoidance of certain environments or activities.
- **Health Anxiety (Hypochondriasis):** heightened anxiety about health, constantly worrying about the possibility of another stroke, complications, or future health problems.
- **Separation Anxiety:** excessive distress or fear when faced with or anticipating separation from attachment figures, especially when stroke survivors require assistance with activities of daily living or if they have become dependent on caregivers.
- **Post-Traumatic Stress Disorder (PTSD):** condition that can develop after experiencing having a stroke. Symptoms may include flashbacks, nightmares, severe anxiety, and uncontrollable thoughts about the event, often leading to significant distress.

Depression & Anxiety After Stroke:

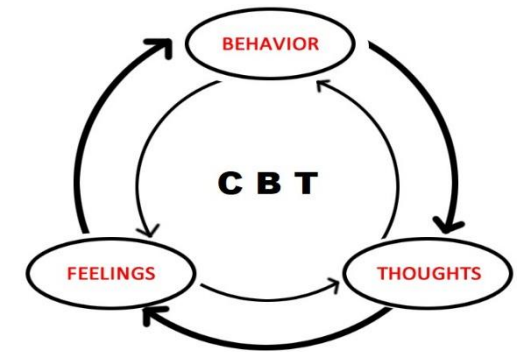
Factors that may contribute



- **Biological Factors:** Stroke damages brain areas affecting mood regulation.
- **Physical Impairments:** Such as post stroke fatigue, loss of mobility and paralysis.
- **Cognitive Changes:** Memory, concentration, and decision-making difficulties.
- **Emotional Impact:** Shock of a sudden health event, fear of recurrence, and adjusting to a new life. Grieving pre-stroke abilities, independence, and lifestyle.
- **Loss of Independence:** Inability to perform certain activities and feelings of embarrassment.
- **Communication Challenges:** Aphasia or other communication difficulties. Can contribute to changes in relationships, roles, leading to isolation and lack of social support.
- **Post-Traumatic Stress:** Stroke as a traumatic event leading to post-traumatic stress symptoms.
- **Medication Side Effects:** Some medications prescribed post-stroke may exacerbate symptoms.

Anxiety and Depression: Effective Treatments

- **Psychotherapy or Talk Therapy:** One on One, Group, Family/Couple counselling helps. A therapist or mental health professional can support and guide in managing depression and anxiety.
 - **Cognitive Behavioral Therapy (CBT):** Focuses on identifying and changing negative thought patterns and behaviors.
- **Medication:** Antidepressants & Anti-Anxiety Medications
- **Mind-body medicine & Lifestyle Changes:** Regular exercise, healthy diet, adequate sleep, breathing exercises, strategies to reduce stress.



Anxiety & Depression: Coping Strategies

- Get outside and stay active – engage in daily exercise
- Avoid alcohol and drugs
- Talk to someone
- Increase activities that bring joy
- Focus on a balanced nutritious diet
- Identify sources of stress and learn to manage
- Challenge negative thought patterns and irrational beliefs through cognitive restructuring techniques. Replace negative thoughts with more realistic and balanced perspectives.



Images Retrieved from <https://au.reachout.com/articles/self-help-for-depression>

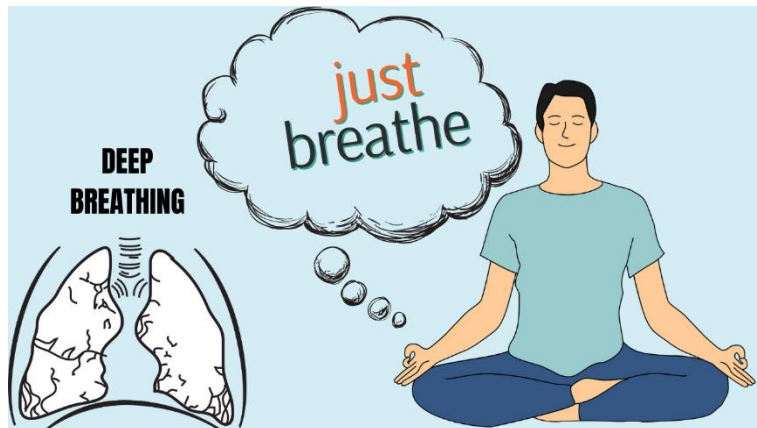
Anxiety & Depression: Coping Strategies

- Cut back on caffeinated beverages
- Take time to unwind.
- Explore self-expression, such as through art, music, writing, or gardening.
- Set small goals & manage time effectively: Breaking tasks into smaller, manageable steps can make them less overwhelming.
- Seek emotional support from family, friends, or support groups.
- Improve sleep hygiene.
- Practice therapeutic journaling and positive affirmations



Anxiety & Depression: Coping Strategies

- Practice relaxation techniques such as deep breathing, visualization, guided imagery, or listening to soothing music to help calm the body's stress response
- Practice Grounding techniques



Stay Grounded Using Your 5 Senses

Relax Your Body, Take a Few Deep Breaths and Focus on the Following...

5 Things You Can See 







4 Things You Can Feel 

3 Things You Can Hear 

2 Things You Can Smell 

1 Thing You Can Taste 

Anxiety & Depression: Coping Strategies

 HAPPINESS CHEMICALS  (AND HOW TO HACK THEM)			
DOPAMINE THE REWARD CHEMICAL	OXYTOCIN THE LOVE HORMONE	SEROTONIN THE MOOD STABILISER	ENDORPHIN THE PAIN KILLER
Complete a task	Play with a pet	Meditate	Laughter exercise
Do self care activities	Hold hands	Go for a run	Essential oils
Eat some food	Hug your family	Sun exposure	Watch a comedy
Celebrate the little wins!	Give a compliment	Walk in nature	Dark chocolate
			

Emotional Lability: Identify & Understand

- **Labile mood is common after a stroke.**
- Also known as Pseudobulbar Affect (PBA)
- Can stem from damage to the emotion center of the brain
- Can cause uncontrollable emotional outbursts like laughter or crying (sometimes rapid switching between both)
- Can occur without an emotional trigger
- An episode may last seconds to minutes
- Sometimes mistaken for depression
- This condition may improve on its own over time
- Clients can speak with their Family Doctor or Specialist about pharmacological treatment options
- Clients may choose to speak to a Mental Health Professional about the episodes

Caregiver Burnout: Identify & Understand

Caregiver burnout is caused by long-term stress that can affect an individual's physical, emotional and mental well-being.

Individuals can become overwhelmed trying to meet the constant demands of their caregiving role. It can have a negative effect on how individuals care for themselves and their loved one. Many caregivers don't take time to care for themselves and they begin to show signs of caregiver burnout.

Common Causes of Caregiver Burnout

-  High demands
-  Unclear expectations
-  Large workloads
-  No privacy or personal time
-  A lack of support

Caregiver Burnout: Identify & Understand

Changes in feelings:

- Depression, feeling helpless and/or hopeless, having low motivation, and trouble concentrating
- Anxiety
- Feeling increasingly resentful and more impatient and irritable with the person you are caring for, and overreacting to minor nuisances

Social Changes:

- Cutting back on leisure/social activities
- Experiencing minimal satisfaction

Physical Changes:

- Feeling tired, run down/having less energy/ constantly exhausted even after sleeping or taking a break
- Difficulty sleeping
- Weight loss/weight gain
- New or worsening health problems
- Neglecting your own needs

Caregiver Burnout: Strategies

For Emotional Changes:

- Watch your self talk- remind yourself of your strengths, hopes and supports
- Increase supportive people around you (peer support), and accept help
- Exercise- dance around the kitchen
- Try relaxation techniques/coping strategies

For Social Changes:

- Invest in other things that give you purpose or meaning such as family, church, hobbies, get out of the house, maintain relationships, prioritize things that make you happy
- Caregiver education –find out what other people do in the same situation

Caregiver Burnout: Strategies

For Physical Changes:

- Take care of your own health too (self-care) which might be as simple as going to bed earlier.
- Follow-up with your Doctor regularly
- Consider respite care or delegating when you can.

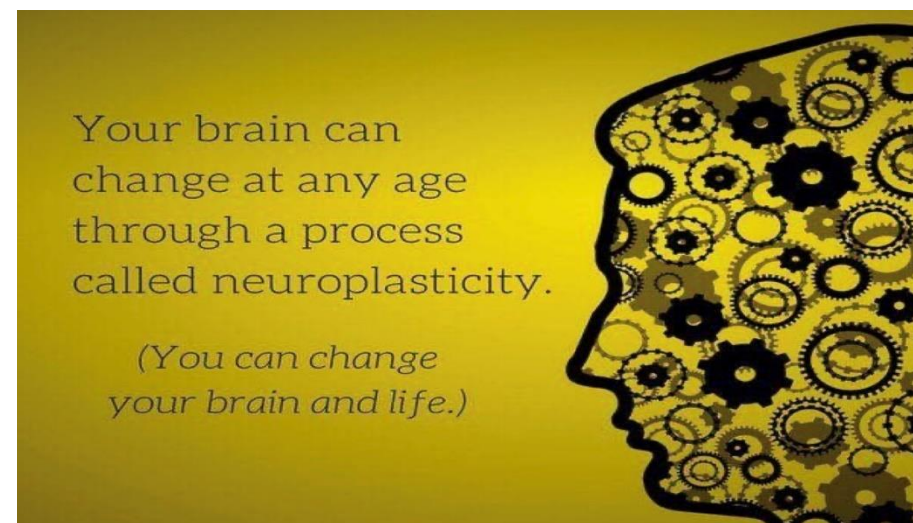
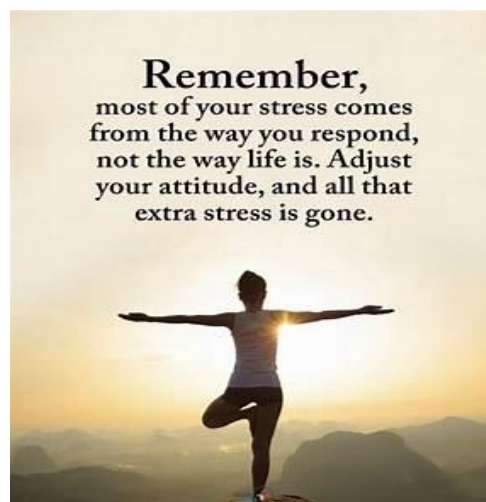
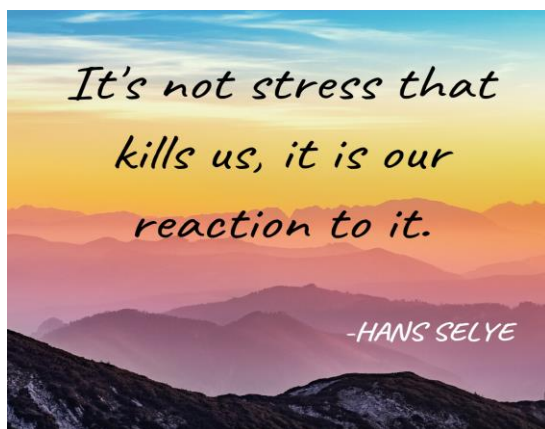
Help people focus on what is important



“Reclaiming your brain after a stroke involves acknowledging that there may be some parts you cannot control. Instead focus on areas which you can control, heal and improve on.”



Remember...



National Hotline: A Safe Space to Talk



- Individuals can call or text **9-8-8**
- Service is free & available 24 hours a day, 7 days a week, 365 days a year.
- Trained crisis responders will listen and provide support as needed

Resources

- **AbilitiCBT <https://myicbt.com/>** Internet-based cognitive behavioral therapy (iCBT) program. Suitable for ages 16+ and includes programs for anxiety, depression, anxiety related to pandemic, pain management and insomnia
- **Heads Up Guys (Men's Mental Health) <https://headsuguy.org>** Online resource that supports men with depression by providing tips, tools, information about professional services, and stories of success.
- **MindBeacon www.mindbeacon.com** Only provider that offers full spectrum of digital mental health support, including face-to-face live therapy, therapist-guided programs, immediate crisis support and free resources.
- **The LifeLine App www.thelifelinecanada.ca Free Suicide Prevention and Awareness App** that offers support for those suffering in crisis and those who have suffered the devastating loss of a loved one from suicide. The LifeLine App also provides awareness education and prevention strategies to guide people in crisis all across the Globe.
- **SouthWestHealthline.ca**
- **Places of worship**
- **211**

Crisis and Counselling Resources by Area for 2024:

National and Provincial Resources:

Dial 988 – new Canada wide crisis line

Ontario Caregiver Helpline 1-833-416-2273 If you're caring for someone and you need support or have care questions, call the 24/7 Ontario Caregiver Helpline: 1-833-416-2273 or use the live chat Mon-Fri from 7am-9 pm at ontariocaregiver.ca.

Crisis Service Canada 1-833-456-4566

Bereaved Families of Ontario – Grief Counselling –Provincial 519-686-1573 Service is Free

Bereavement support provided to parents and families following the death of a child at any age, including adult children and pregnancy loss * supports to children and youth who have experienced the death of a sibling or parent * support is based on self help/mutual aid and includes one-to-one in person/telephone support group meetings community education regarding bereavement and its impact on families guest speakers lending library with books relevant to the grieving process and bereavement special memorial events throughout the year

Threads of Life – Assoc. for Workplace Tragedy Family Support -National 519-685-4276 Service is Free

Volunteer Family Guides - One-on-one peer support delivered by trained Volunteer Family Guides who have also suffered from a workplace tragedy * material resources to assist in understanding the grieving or traumatic emotional processes/experiences that occur after a workplace tragedy

Bounce Back Ontario www.bouncebackontario.ca Free skill-building program managed by CMHA. Designed to help ages 15+ manage low mood, mild to moderate depression and anxiety, stress or worry. Delivered over the phone with a coach and online videos.

Ontario Structured Psychotherapy Resource self refer for time limited free Cognitive Behavioural Therapy 1-416-535-8501 x36777

Wellness Together Canada – Mental Health and Addictions 4 free therapy sessions call 1-866-585-0445

Green Shield Cares mental health program for women (www.greenshield.ca) includes 2 hours free talk therapy, subscription for online CBT and an online wellness hub

MentalHealthHelpline.ca 1-866-531-2600

ProblemGamblingHelpline.ca 1-888-230-3505

Assaulted Women's Helpline 1-866-863-0511

Trans Lifeline Helpline 1-877-330-6366

Pet Compassion Careline 1-855-245-8214 (support with grief and loss of a pet)

Farmers Wellness Initiative 1-866-267-6255 Free Online/App Support Resources

South West Including Grey Bruce:

Mental Health Crisis Line of Grey-Bruce 1-877-470-5200 OR GBHS Crisis Support Program (go to ER in Owen Sound)

Bright Shores Health Services (formerly Grey Bruce Health Services):

Brief Counselling program- includes groups 519-376-2121 x 2386

Case Management-includes individual and in home 519-371-8850

Warton: 519 534-4388

Markdale: 519-986-3030

Hanover: 519-364-7788

ACT Team 519-376-2121 x2386

Bruce Shoreline (Kincardine, Southampton, Port Elgin, Tara) 519-797-2880

GBHS Crisis Support Program (ER in Owen Sound) or phone 226-379-8571

GBHS Chaplaincy Services

Canadian Mental Health Association: Owen Sound 519-371-3642 Warton:(519) 534-0333 Hanover: (519) 364-0184

CMHA Peer Support Warm Line 1-888-768-2488 3pm to 7pm 7 days per week

Sexual Assault Crisis Line Grey Bruce 1-866-578-5566

Victim Services Grey Bruce Perth: 1-866-376-9852 www.vsbgp.com

Family Health Team Owen Sound: 519-470-3030 ask your Doctor if they have a Social Worker

Southwest Ontario Aboriginal Health Access Centre (SOAHC) 519-376-5508

South West Including Elgin, Middlesex, Oxford and London

CRISIS and Support line Reach Out is a free, 24/7, confidential mental health and addictions support and services line for people living in Elgin, Middlesex and Oxford and London. Call or text **519-433-2023 or 1-866-933-2023**

Family Services Thames Valley 519-433-0183

Individual, couple, family and group counselling and support services. Services provided in additional outreach locations: Lucan, Parkhill and Glencoe
Counselling Full Fee: \$125 per session; and a sliding scale is used for those who are unable to pay full fee

Community Counselling Program - Short-term individual, couples, and family therapeutic counselling

Group Counselling - Counselling services to help people increase understanding of their situation, provide a safe place to express and examine feelings, develop and expand coping strategies, enhance self-esteem and strengthen supportive relationships

Sexual Abuse Services - London Region - Short term strengths-based counselling for women who have experienced sexual abuse or sexual assault

Sexual Abuse Services - Middlesex Region - Short term strengths-based counselling for women who have experienced sexual abuse or sexual assault

Community Counselling London 1-888-350-2011 Community-based counselling services for people 12 years and older Sliding scale available.

Most of the clients we see are either fully or partially subsidized.

St. Joseph's Hospice – Grief Counselling 519-438-2102 Service is Free

Support services that help bereaved clients adjust to loss associated with the death of a loved one, including individual and group counselling, spiritual care and complementary therapies

London Abused Women's Centre Assaulted Women's Helpline: 1-866-863-0511 Service is Free

Women and girls 12 years and older, experiencing violence and abuse in their intimate relationships (those who are being abused by a current or former adult intimate partner (i.e. husband, boyfriend, common-law or same sex partner), women and/or girls who have been prostituted, sex trafficked or sexually harassed

Anova 519-642-3000 or 1-800-265-1576 24-hour crisis, support line and 24-hour walk-in crisis support at **450 Clarke Rd** and

101 Wellington Rd shelters to women and children not currently residing in shelter * emergency transportation to safety provided

Service is Free

Daya Counselling 519-434-0077 Individual, couple and family counselling for people aged 16 years and older. Virtual and in-person options. Set fees.

Sliding scale options available for those that qualify. By appointment only.

Elgin, Huron, Perth Counties

Huron Perth Helpline and Crisis Response Team 1-888- 829-7484

Senior's Mental Health, 28 Centennial Drive, Seaforth, 1-866-527-8421 Ext 4818

CMHA Huron Perth -540 Huron Street, Stratford, 1-888-261-9350

Family Services Perth Huron – 142 Waterloo Street South, Stratford, 1-800-268-0903

Elgin Counselling and Mediation 519-633-4423 Therapists work with individuals, couples, families, and youth.

Set fee * subsidies available * works with some employee assistance plans and accepts extended health benefits

Oxford County

For anyone in immediate need of assistance, please call Reach Out 24/7 at 1-866-933-2023.

Oxford County Walk-In Counselling - immediate access to counselling services, with clinics available in Tillsonburg, Ingersoll, and Woodstock. Service is provided outside of regular “business hours”, with availability late into the evenings and on weekends, to provide assistance to those who are employed or in school during daytime hours. Free services, and are a viable option for those waiting for ongoing support or treatment. **BY APPOINTMENT ONLY**
Contact requested site in advance to pre-book appointment. Same day calls are welcome but not guaranteed.

WOODSTOCK

Mondays & Wednesdays - Wellkin Child & Youth Mental Wellness (Children/youth from birth to 17 years of age and their caregiver)
912 Dundas Street | 1-877-539-0463 www.wellkin.ca (Quick Access Therapy Services)

Wednesdays from 9am to 12pm Oxford County Community Health Centre (Ages 16 and up) 35 Metcalf Street 519-539-1111 ext. 201 or ext. 207

Thursdays from 12pm-7pm (All ages) Woodstock Hospital (Athlone Entrance) | Valid Health Card Required 310 Juliana Drive | 519-421-4223 ext. 3224

Saturdays from 10am-3pm (All ages) Canadian Mental Health Association 522 Peel Street | 1-800-859-7248

TILLSONBURG

Mondays from 12-7pm (All ages) Canadian Mental Health Association 41 Broadway Street | 1-800-859-7248

Oxford County Community Health Centre Tillsonburg Point of Access The Livingston Centre 96 Tillson Avenue Tillsonburg, Ontario N4G 3A1
Outreach

Monday, Tuesday, Thursday & Friday: 8:30 a.m - 4:30 p.m.

Voice: 519-842-9008 ext. 323

Substance Use Counselling

Monday, Tuesday, Thursday & Friday: 8:30 a.m - 4:30 p.m.

Voice: 519-842-9008 ext. 322 **Therapy** Our counsellor is available to anyone who is over 12 years old who lives in Tillsonburg.

Counselling is accessed through outreach. call 519-842-9008 ext. 323

Substance Use Counselling For substance use counselling please call the counselor directly (519) 842-9008 ext. 322.

INGERSOLL

Tuesdays from 3-6(All ages) Canadian Mental Health Association Ingersoll Nurse Practitioner-Led Clinic 19 King Street East | 1-800-859-7248

Monday, Thursday and Friday 9:30am – 4pm Tuesdays 12:30pm – 7pm | Wednesdays 12pm – 4pm (Ages 16+) Ingersoll Nurse Practitioner-Led Clinic 19 King Street East | 519-926-6752 Voice: 519-842-9008 ext. 323

Thank- You

You have now completed **Module 6: Coping and Adjustment**. For any questions, please contact SWOSN@lhsc.on.ca and/or contact your designated Community Stroke Rehabilitation Team Representative.



Stroke Network
Southwestern Ontario