

To
Joint Select Committee

PREVENTATIVE HEALTH CARE

From

Peter Rubenach

Beverley Rubenach



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Sorry this is handwritten but we don't have
a computer

Sorry about spelling mistakes and grammatical
errors and messy writing etc.

We can supply more information etc if you so wish eg Regener's book,
Report on PASCAL International conference 2008 by Hannah Rubenach

Thank you for giving us a chance to
participate in this important issue.

Looking forward to seeing the practical outcome
throughout Tasmania.

25th February 2013

We are Peter and Beverley Rubenach and we will begin by briefly sharing our situation. In doing so we hope you will gain some insight into the life of full time carers of high needs / high risk people.

Also you may gain some understanding of what life is like for people with disabilities, especially those suffering from cognitive and/or mental illness disabilities.

Before we continue we want to share a Chinese proverb that we practised for 16 years while we were home schooling our 6 children years ago. We find it can be successfully applied to any situation and we feel it can be applied to Preventative Health Care:

"Tell me - I forget.

Show me - I remember.

Involve me - I understand."

A bit about us:

- Peter is 66 year old and Beverley 65(almost) we live on our 69 hectre freehold property at Gray (7km east of St Marys)
- We have 6 adult children ranging in age from 26 to 36
- We are both full time carers (24 hours a day 7 days a week) for our youngest son, Tim. and receive carers pensions.
- We have both gained certificate IV in horticulture so we can be better equipped to fulfill a long term dream of turning part of our property into educational and display gardens. Our daughter, Hannah (35) is helping us in this venture which we have been working at for the past 12 years. Called *Haven of Hope* the aim is to tell, show and involve people in organic, sustainable and diverse horticulture and in alternative health treatments and life style that is holistic ie body, soul and spirit.
- We did home schooling for 16 years with Beverley the main instructor (Peter did woodwork etc with them and other home schooling families one day a fortnight)

During this period Beverley was primary carer for Tim as Peter was a self-employed builder/cabinet maker/handyman. But when our 5 eldest children all left home for higher education/employment Peter had to give up this work to help care for Tim. (over 10 years ago.)

A bit about Tim

Tim contracted meningitis at 5 months of age. This resulted in ABI (Acquired Brain Injury) and severe epilepsy (from 16 months onward)

Tim suffers from physical disabilities - severe epilepsy, poor temperature control and poorly regulated bowel and urine movements. (he can urinate anywhere at any time), headaches, digestive problems.

Mental problems - depression and anxiety, Cognitive problems - especially challenging behaviour such as biting, kicking, punching, pushing etc - such behaviour is unintentional and he is unaware of his behaviour/actions. It occurs during complex partial seizures and as a form of communication.

He displays a lot of inappropriate social behaviour such as having nose to nose "conversations" even with strangers, going into a shop and pointing his finger gun fashion and yelling "Stick 'em up".

Tim can not communicate pain or emotions and in most things he is like a 3-7 year old. He usually only talks in words like "yes", "no", "bang", "got you". - rarely does he use sentences anymore. He could talk and hold conversations until he was 10½. - He had "seizure clusters" then and he lost this ability plus the limited knowledge of the alphabet and simple reading and writing.

Any traumatic event sets Tim backwards. Since the 2006 East Coast bush fires Tim has withdrawn into himself.

(We had to evacuate at the time of the fires)

NB. We have tried since 2006 to get appropriate counselling for Tim concerning the fires but nothing is available.

Now 7 years later Tim is traumatized whenever he sees smoke (and even fog distresses him as he thinks it is smoke). If there was appropriate counselling service for people like Tim maybe Tim would be able to

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understand things better. We feel it is anxiety that has caused the decline in his communication.

This decline in his communication has put extra strain on us emotionally and physically. It is so distressing to not be able to understand Tim's needs and desires. We often use guesswork. When we get it wrong Tim gets aggressive.

Because we are rural we miss out on many essential services. When Tim was young there were no early intervention services/programs available in our area.

Our current problems (health)

Peter suffers frequently from reoccurring glandular fever at times he can go 2-3 weeks without any signs then he will have daily bouts. It leaves him extremely fatigued and in pain with shortness of breath when he moves. If he rests he can recover in an hour or 2 but how can he rest when he has to be caring for Tim?

Peter has hearing problems. He had teeth extracted almost a year ago and is still waiting for his dentures (he still hasn't had the initial fitting appointment that was promised 9 months ago.)

Peter gets very little/broken sleep as he needs to sleep in a bed next to Tim as Tim has many night time seizures.

Peter suffers from anxiety and stress as he cannot get time to do essential maintenance to our home and gardens

(We want to make our home more fire safe by adding a sprinkler system to the roof and removing high grass and rubbish from the gardens etc but all his time is taken caring for Tim.) NB having our home "fire safe" is essential because we ^{may} not be able to take Tim away if a bushfire threatens our area.

Beverley - has been waiting 2½ years for a semi urgent hernia operation (an appointment was made for 21st Dec 2012 but we had no support workers available so it had to be cancelled)

She suffers from frequent severe migraines (24 hours in bed) but has to get out of bed to watch Tim while Peter goes to the toilet etc

Beverley needs a cataract operation as soon as possible. She has fluid retention and often finds it difficult to walk. She has interrupted sleep "listening" for Tim.

Our problems (caring for Tim)

- Tim lives in an almost constant 'seizure state' i.e. experiencing some type of seizure or abnormal electrical activity in the brain.
- Tim has 2-3 tonic clonic seizures a week (he falls and is unconscious) he needs to be constantly "shadowed" so we can catch him at the onset of a tonic clonic seizure so he does not fall causing injury or even death. Tim is 175cm tall so Beverly is finding it increasingly difficult to assist Tim during these seizures.
- Tim has countless complex partial seizures each day. It is during these seizures that challenging behaviour occurs where he can harm himself, other people and damage his surroundings. (He can have days of aggressive behaviour or he can have days of being placid and lying down a lot - It all depends on what part of the brain is being effected).
- During complex partial seizures Tim is unaware of his actions and frequently unaware of his surroundings. Often during these seizures Tim will walk/pace aimlessly for $\frac{1}{2}$ to 3-4 hours at a time. He can wander anywhere eg into the bush or onto the highway. So we have to have at least one person following and watching him all of the time. The other person stays within calling out range to give help when needed (and to give rest to the "Shadower").
- Tim can eat or drink anything he finds i.e. on the street, in the rubbish bin - stopping him can cause aggressive behaviour because he doesn't see any reason why he should be prevented from doing so.
- Tim can dress in 5-6 layers of clothing when the temperature is 30°C + or go out in the frost wearing only a singlet or even only a baseball cap. The only way to remedy this type of situation is to coax Tim to take a bath (there's a limit to how many baths can be taken in a day).
- Tim is a restless sleeper often only having 10-30 minute naps then sitting up in bed and yelling "hey" or "bang". Someone has to sleep in a bed next to him as he has frequent nighttime tonic clonic seizures.
 - * As we have raised 6 children we have not had a restful night's sleep in 36 years.
- Tim used to like socializing until he was 18 year old. It seems he then realized he was "different" and now he doesn't want to go anywhere where he has to mix with people.

- During home schooling days we used to entertain a lot of people in our home eg birthday celebrations, family day activities, Christmas and Easter events etc. (up to 70 people at a time)

Now Tim doesn't like people coming to our home. We are feeling increasingly isolated.

- Often, if we attempt to go shopping Tim is either aggressive to people or he wants to "buy out the shop" We have an ABI ID card, supported by Tasmanian Police that we can show shop owners/assistants. We frequently take unpaid for, unwanted items to our car, there we divert Tim's attention while one of us return the items to the shop.

- We rely heavily on our daughter, Hannah to do our weekly grocery shopping (and any other shopping) but this cuts into her extremely busy work schedule and is unfair on her.

NB. We have had 40 hours away from our property, as a couple in 36 years. (When our children were small we did not go - now for 26 years we could not do so because of Tim's high needs/high risk)

- We have been able to have 40 hours (on 2 separate occasions) because we now have a service provider with staff that can cater for Tim's high needs/high risk.

We currently receive 14 hours support a week through Tim's ISP (Individual Support Package) BUT this translates to 7 hours a week because 2 workers are needed at a time plus deduction of travel time from Launceston 150 km away so in reality we have about 5 hours per week if and when workers are available. We need highly trained local workers also.

- Being only on carers pension for the past 10 years has put us under financial stress. We cannot supplement our income as we have no time (or energy) to do so. We have no super annuation: ∴ and holiday pay etc.

- We want to give each of our adult children, including Tim a title of our property. To create 6 titles we need to sub divide 1 title but this is very expensive plus we have been told by Centrelink that if we give away our land we will lose all or most of our carers pensions. Centrelink maintains we could sell our land and be self funded retirees. - Retirees? How do we do that when we are carers? If Tim was in a group home or other support accommodation it would cost the government \$180,000 + per year. We have been caring for Tim with his high needs/high risk for 26 years.

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- * Being siblings of a disabled brother has meant our sons and daughters have / are sacrificing much to help us so why can't we give them land as a gift without us being penniless? This anxiety is constantly with us. We need HELP. Individual cases must be taken into consideration!
 - As stated previously it causes us stress and anxiety when we can't get basic things done eg collecting fire wood. We had to instal a new wood heater 2 years ago - one that will burn all night for Tim can be up wandering around the house for hours in the middle of a winter's night "wearing" nothing. We can't get to make our home fire safe. We have bought a sprinkling system (on bank card) but we don't know when or how we can instal it. Seeing things going to wrack and ruin is distressing.
 - * We are under constant emotional, physical and financial pressure and WE ARE NOT ALONE - many full time carers are "in the same boat" as us.
 - We know of one lady who lives locally who is an alcoholic because she cannot cope with the sole care of her son (in his late 20's) who has a severe disability. She gets minimal support. Her only escape has been alcohol!!
 - A relative has been caring for her severely disabled daughter for 58 years. How long can she do so? She herself is in constant pain from back and leg problems. Like us she worries about the future.
 - One local man who cares for his wife 24/7 frequently says "What wouldn't I give just to have 24 hours of "normal" once in a while."

Preventative Health Care for Carers?

- Help! Help us try to maintain some health, energy and normality by:
 - understanding the demanding role of carers and doing something about it.
 - give us more ISP / support hours per week. so we don't get totally burnt out
 - Support and "hurry up" the NDIS (National Disability Insurance Scheme). Make sure it is available for ALL in need. Make sure it doesn't just stay as a

good idea. Make sure it doesn't get put in the "too hard basket". Make sure it is not scrapped if there are changes in Government.

- Recognise that ABI and mental health and cognitive disorders are increasing in our nation and plan, prepare and educate all people eg stop gladiator type sports - much ABI is caused by sport injuries (often a result of over competitiveness)
- Give choice of providers to the disabled. Having freedom to choose service providers will relieve much stress

There are service providers who are receiving Government funding but are not providing services appropriate to client needs. - This must stop. We are currently in the process of a direction tribunal with anti-discrimination because our former provider withdrew services.

We went 1 year without any support services. Hannah took a year off work without pay to help us secure an ISP so we could get our current provider. This has/is causing our family much physical, emotional and financial stress.

- Lobby to have a Disability Ombusman in Tasmania. We understand that many disability organisations cannot be investigated for things like discrimination because the Ombusman can only investigate Government organisations and no private organisations.

* We are not alone in having this experience of service providers putting "a gun at our heads" ie if the disabled person has challenging behaviour services will be withdrawn even when the challenging behaviour is "part and parcel" of their disability. (Thankfully there are 1 or 2 understanding providers)

A part of Preventative Health Care is creating an atmosphere of trust, co-operation, choice, freedom and a sense of holistic well being. Far too often this is not happening between service providers and clients and their carers. We often live in FEAR of our meagre services being withdrawn.

NB We need an urgent ministerial inquiries into Disabilities and Support Services

If you want more information etc we will gladly supply it! (8)

• Supply sufficient and appropriate group homes and homes for the elderly scattered throughout each municipality in Tasmania.

To our knowledge there is not a group home for the disabled anywhere in the Break O' Day Municipality. It caused a great deal of stress and worry to the disabled and elderly and their families and friends if they know that once in-home care finishes they will be forced to move to unfamiliar surroundings. - This worry is with us constantly!

We know of elderly people who just decided to give up living because they knew they would have to move away from loved ones and all that was familiar.

We know of someone who committed suicide because he did not want to be put in an aged care home - There was insufficient help available for him and his wife so he decided to give up and end his life.

We know of a relative who committed suicide because his own health was deteriorating and he could not face the thought of putting his disabled daughter in an institution where it was too far away for him to visit her.

• More services for rural areas, please!

We believe that Break O' Day Municipality has the least options and access to support services than anywhere else in Tasmania yet disabilities and mental health problems are extremely high in this region. HELP!

• All Preventative Health Care must cater for body, soul and spirit. There must be choices available including easy, affordable access to alternative treatments eg massage, reflexology, herbal remedies etc even good footwear for those struggling financially (pensioners)

• Early intervention is essential especially for cognitive and mental illness.

• More activities must be made available to allow intergration. Isolation is often a major problem in rural areas. More funding is needed for projects such

Riding for the disabled and for groups/organisations that concentrate on restoring eg riding/care of horses for women who have suffered sexual abuse, also providing pets and pet care (food, immunisations etc) to alleviate loneliness.

Now we will move onto SPORT / Recreation etc

• STOP Governments sponsoring professional sport!

All professional sport should only be sponsored by private sponsors and not by tax payers.

These private sponsors should NOT be allowed to promote their products or use sponsorship as a tax dodge.

If we want a healthy nation we don't want to be bombarded with things like beer and soft drink signs at sporting events.

• ENCOURAGE - community participant sports and recreation.

Revived Saturday/Sunday afternoon friendly neighborhood/community cricket matches etc. Let all who wish take part - 5 year olds, 85 year old; able bodied and those not so able. Have locals provide/sell local nutritious food and drinks. Have local entertainment and activities eg balloon sculpturing, Have demonstration of crafts etc.

Make it community participation & Government sponsor these events in the form of insurance/public liability etc.

Presently in St Marys the Woodcraft Guild is attempting to establish an Historical Games Society. The idea is once a month people dress up in period costume and play badminton, croquet, quoits etc. (one month Victorian era etc.)

But they need funding to get started (It will be fun and relaxing)

Surely the Government would be promoting Preventative Health Care if they sponsored local, community participant sport/activities rather than pouring large amounts of money in professional spectator sports.

* How health giving is spectator, professional sport?

How much holistic well-being is generated by spectator professional sport?

It seems to us that professional, spectator sports encourage passive participation (sitting), the consumption of junk food, soft drinks and/or alcohol. Such things

tend to produce aggression, frustration and a host of negative actions and reactions. (10)

On the other hand local, friendly, non-competitive ("I'm here for the fun of it - not for money etc") where all can take part and feel a sense of belonging produces positive actions and reactions and also supports local economy.

STOP spending \$15 million on upgrading Blindstone arena etc (\$6,000 for a rump to sit on a seat?)

SPEND that money on helping local communities, especially rural and disadvantaged communities, restore - identity, individuality combined with togetherness and unity. - true community where people interact and are involved and care for one another.

* Every person has the RIGHT to discover their own identity.

- to develop their own individuality
- to demonstrate their involvement in their community (and in life in general)

Preventative Health Care - FOOD

FOOD - we are basically what we eat!

Hippocrates said, "Let your food be your medicine. Let your medicine be your food."

We have been very encouraged to read Food for all Tasmanians - a food security strategy - the Tasmanian Food Security Council.

* Please, don't let it just be an excellent report START IMPLEMENTING IT NOW. (The foreward alone is a powerful statement and must be acted on)

A quote from Food for all Tasmanians - "Food therefore must be valued for its fundamental role in our social experiences, our health, the economy and the environment - - -"

We would like to share the following - it demonstrates the "power of one" - how one person can make a big difference. - For many years Georgie and her husband

cared for foster children especially those with challenging behaviour. (They have a daughter with mild ABI). They gave up foster care but Georgie's heart was still set on helping those children most needing help. She noticed that after school and during school holidays there were a number of children who were not taking part in after school / holiday activities in their neighborhood. Georgie, being Georgie, soon befriended some of these children. She found they all had one thing in common - they were rejects - they had all been expelled from taking part in activities etc. because of bad/unruly behaviour, Georgie knew this behaviour was due to lack of self worth and "belonging" and boredom. With consent from their parents she invited them into her home and taught them backyard gardening. She feed them nutritious food. She taught them to cook and prepare the produce they grew, - simple things like salad sandwiches, pumpkin soup etc.

Soon other children asked to join. Now parents have asked to join in so they can learn gardening and cooking. Families are being restored as they work together on the most rewarding and fundamental of all things - growing and eating your own food. Their holistic needs and desires are being met - their connectedness with the earth (and their Creator) and creation) and the sense of restored self worth - that individuality, identity, involvement!

"Tell me - I forget

Show me - I remember

Involve me - I understand" (Chinese proverb)

We home educated our 6 children for 16 years and we found that Chinese proverb extremely valuable in all we did. They discovered their own identity, they developed their own individuality and demonstrated their involvement in life and their community.

x Educate, Educate, Educate - but be sure it is sound, life giving education.

We will share another little story we feel interesting.

Several years ago Beverley and Hannah were sitting in a dentist's waiting room when Hannah made an interesting observation. There on the wall were glossy posters promoting health and nutrition - the do's and don't's. The do's all had

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the healthy nutritious food showing fruit vegetables etc (although a whole pumpkin didn't appear very appetizing) and raw meat and a raw fish complete with scales, fins and eyes (yuk!)

on the poster of do not's were glossy photos of desserts complete with cream and cherry on top (yum!) Which poster would set your taste buds into overdrive? Which poster would appeal to children?

Hannah wrote to the Health Department and asked if future posters could present Cooked meat and fish and how about a bowl of pumpkin soup (along with the whole pumpkin) In other words present food how good cook books do - make things look appetizing and interesting and tempting.

Manufacturer of junk food know how to advertise to appeal and tempt.

- STOP the advertising of junk foods and drinks during children prime time viewing on T.V. and stop ads of alcohol etc at sporting venues and on TV. of cigarettes

Let the clear plain packaging just be a start of doing away with false/bad advertising i.e. saying junk stuff is safe and healthy and promoting alcohol as being mancho etc.

- STOP the sale of Australian land to overseas countries! Keep Australian soil Australian soil. We need our land/soil for growing our own food and food should be our main export. Want Preventative Health Care? Start with our own food!

- STOP importing second grade (origin often unknown) food when we can grow our own. (preferably organic and in season)

STOP our food production being lost because it can not compete with cheap imports. E.g. potatoes and now the water melon industry is under threat.

- STOP the importing of disease (or potential disease) ridden products e.g. NZ potatoes, pineapples from Indonesia that have "fruit collapse disease"

- STOP the use of our farmland for plantations (use poor soil/terrain areas for plantations)

- RESTRICT big multi nationals etc from "pushing out" locals especially in rural areas. To quote from

Food for all Tasmanians- "Some areas in Tasmania are at risk of becoming "food deserts". Food deserts are often in prime agricultural areas but where the traditional corner stores have been closed as a result of demographic and industry change."

NB. St Helens is listed as a food desert yet a few decades ago all this region (the Fingal Valley included) was thriving with agriculture. One hundred + years ago the region was largely self sufficient. Does "progress" mean improvement? Turn the food deserts back to thriving local communities where locally grown food is easily accessible and affordable (Reduce our carbon footprints at the same time).

- RESTRICT foreign investment to no more than 20%-30% so we Tasmanians/Australians have the say, and this would stop so much Australian money going off shore to foreign share holders/investors. Keep profits local!
- SUBSIDIZE FOOD PRODUCERS so fresh, local fruit and vegetables are available and affordable within each municipality/community.
- HELP local councils to cover public liability on things like compost/green waste compost (bark, woodchips etc) so that locals can purchase such compost cheaply, locally. (Composting has long been proven to be an efficient way to produce nutritious food, conserve water, retain healthy soil etc). Some councils mulch their green waste but must transport it out of their municipality for commercial composting. They fear that should they sell locally produced compost they could face public liability changes should weed infestation occur. but we need compost, compost, compost.
- PUT FOOD before mining and forestry. We need both mining and forestry but NOT at the detriment of FOOD production. Farmland/agricultural/horticultural land MUST remain FOOD Land not plantation land. Open cut mining should NEVER infringe of FOOD production land.

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- PUT FOOD before profession sport. Subsidize food producers instead of sponsoring professional sport - you can't eat a football!

- PUT legislation in place to ensure bold labelling on products that are not Australian. Country of origin of the food must be stated - if food is from China it must be unmistakably be shown as such.

- PUT legislation in place to boldly label products that are GMO.

- TAX imported foods much more heavily - STOP level playing fields - it ruins local economy.

- PROMOTE markets and farm gate sales.

- PROMOTE and subsidize downstream products from locally grown produce eg juice, jams

- PROMOTE hands on activities especially those promoting gardening and bush tucker activities.

- PROMOTE things like the TRANSITION MOVEMENT.

The TRANSITION MOVEMENT certainly encourages and supports this quote from Food for all Tasmanians - "Local food systems are important because they enable people to contribute to their own well being through localised sustainable solutions grounded in local context".

The Transition Movement has recently been introduced to the Break O' Day Municipality. After a visit from the Transition Towns Roadshow local people decided to get actively involved.

Each town is selecting projects to focus on to suit local needs and interests.

St Marys is concentrating on FOOD and recently held a "100 mile dinner" in the Community Hall. Everyone brought food to share. The food had to be made from ingredients that were 80% local (within a radius of 100 miles) and the remaining percentage fair trade.

The event was a huge success and is now scheduled to be a monthly event. Everyone attending were surprised

by the variety and creativity of food (from home cured bacon to sassafras tea). It was educational with people learning what is available and where to purchase items eg quinoa and green tea. Recipes and ideas were exchanged. It was community being community.

Another aspect of the Transition Movement is ^{Community Supported Agriculture}. Here locals pledge to buy certain products from local producers eg one family will pledge to buy 50kg of potatoes from the local farmer. Conditions are decided upon by both parties such as paying a percentage up front so the grower can buy seed and the remainder paid on purchase.

GENERAL HEALTH

- The St Marys area is seeing a revival in community activities and events. People are coming up with many wonderful ideas to promote community.
eg last year in conjunction with the annual auto show local craft people got together for a 'wrap a pole' event in the town. Quilts, posters etc were made and wrapped on hydro poles around town. It was very popular. It involved many groups and individuals. Local schools got involved. It was extremely creative.

NB. Many more events and activities could be held locally if the Government would only help by providing public liability insurance.

• Now to share 2 little 'stories'

About 10 years ago Hannah ran a Youth Group in St Marys for 6-16 year olds every Friday night.

We helped, we had many grand ideas and high hopes. But for several weeks we could not use our well prepared programs as we hoped. Before we could make any progress with these young people we had to teach them basic RESPECT - respect for themselves, for others and the environment (including material things like the Hall chairs). Once they valued being respected they valued respect. Then they listened, and became involved and it was a successful Group.

While on the subject of respect:

Years ago Peter did relief teaching in woodwork at St Marys High School (he was a tech aide at the time). Peter was warned (and had observed himself) that one boy was trouble with a capital "T". All his woodwork projects were pathetic, he was disruptive and at times dangerous. One day he told the boy he would take something home at the end of the year that he would be proud of. The boy was scornful and abusive but Peter went ahead with his plan. — he took the boy's coffee table and with a mallet knocked it apart. Peter expected the angry boy to attack him but Peter told him to start all over instructing him on what to do. After weeks of swearing, sweating and sanding the table was complete. Each week of the project as the boy saw something beautiful emerging his attitude changed. This change was noted by staff and students alike. The boy respected himself and this created respect for everyone and everything.

The coffee table went home. Days later the boy's parents came to the school to see Peter and thank him — they had a changed son. That boy went on to be successful simply because he learnt the value of respect.

So for preventative health how about activities / projects that focus on respect and self-esteem?

So we will end on this note — You can give a hungry person a fish to eat or you can give ^{a hungry} a person a fish to eat then teach that person to fish.

Thank you for ~~taking~~ the time to consider our opinions etc. We have a lot more we could say but we are running out of time (How lucky is that for you?)

P.S. After the 2006 East Coast Bushfires one local lady had an idea for community recovery. Jan Sparkes asked the

community to write of their experiences of the bushfires so a booklet could be published. She also asked for people to participate in an art exhibition depicting their feelings etc. Dr Rosa McManamey from U Tas assisted. The result was the publication of the Regener8 book and an excellent art exhibition.

Both greatly helped the residents of the East Coast to recover. Being able to express feeling (fear, joy etc) of the fire experiences in either/or writing/art was a wonderful healer. People need to be able to communicate with each other. Regener8 and the art exhibition gave all affected residents a sense of connectedness.

In May 2008 Dr Rosa McManamey presented a paper titled "Arts, Health, Community Resilience and Healing after a Natural Disaster" to the PASCAL International Conference held in Limerick, Ireland.

Our daughter, Hannah was community sponsored (money raised in less than a week) to be a community representative for Rosa's paper and the Regener8 book.

She and Dr McManamey had a very successful presentation (the Regener8 book was a main feature). About 100 delegates from 33 nations attended the conference and some of these delegates took the Regener8 book back to their countries to use as a model for restoring a community suffering trauma. One person from USA was from a place where a school shooting had occurred. He felt the Regener8 book and art exhibition was just what that suffering community needed. They needed "grass roots" involvement not merely financial handouts from Governments. They needed a personal avenue of expression!

We are sure that Regener8 and the Art Exhibition was a Preventative Health measure as it was people helping people, people identify with each other - a loving caring supportive COMMUNITY expressing its identity/involvement

(This time we will finish and send it on its way before we think of other things to add.)