

# Come to the course with a plan

By Cory Gentes  
Special to The IFP

The Canadian men are heating up on the PGA Tour just in time for the Canadian Open. Last week Graham Delaet had a great showing and this week David Hearn of Brantford recorded his second playoff loss on the PGA Tour. Hopefully the third time will be the charm.

This week's tip is on the mental side of the game and making a plan. In order to hit good golf shots we have to have a repeatable swing but before we make that swing we should have a plan in mind for every shot we play.

The plan should start with deter-

mining the lie we have and what that allows us to do with the ball.

Obviously, a ball that is teed up has fewer restrictions but we do have to determine our tee height for the shot we are playing.



From the  
Ground  
Up



When the ball lies in the grass, we have to determine what may happen to that club and or clubface as we move through the grass.

What is the plan if we are in a divot? What if the ball is sitting up?

Buried in a deep lie? How do we attack the shot?

The second thing we need to consider based on the lie is what direction we are going to start the shot on and shot shape. If we are going to slice across a ball in a deep lie, what is our intended target line? If playing under a branch how high or low do we want to hit the shot?

The key to the plan is to visualize what we want to do and then step up the ball and execute it. Without a plan, execution is a guess.

Cory Gentes is a 14-year PGA of Canada Teaching Professional and the Director of Instruction at The Old Pro Driving Range.



## Team of the Week: U-15 Mustangs

The Georgetown Mustangs gave up just one goal all weekend— on a penalty kick in their opening match—en route to earning the championship in the boys' under-15 division at the third-annual Heads Up Cup in Hillsburgh. After being edged 1-0 by Guelph in their opener, the Mustangs churned out wins of 1-0 over Mount Hamilton and 3-0 against Oak Ridges before facing Oak Ridges in the semifinal. The score remained 0-0 after regulation time and went to penalty kicks. Georgetown goalkeeper Josh Bridge made three saves while his teammates converted their spot kicks to advance to the championship game. In the final, the Mustangs defeated East Gwillimbury 2-0. Team members, front, from left, are: Mircea Gavrilă, Jordan Furtado, Justin McLaughlin, Kobe Vieira, Mark Cripps, Quincy Blandford-Grosse, Aiden Hodgson, manager Gary Collins. Back row: Coach Wayne Vieira, Morgan Sullivan, Evan Sraga, Nicholas Collins, Erik Rasmussen, Aidan Feeney, Jack Vago, Brady Borges, Juan Jimenez, Josh Bridge, Alessio Luna, assistant coach Steve Saulnier.

Submitted photo

## Canadians seek repeat of 2011

Continued from page 41

**IFP:** With these Pan Ams being in Toronto, you'll probably have a large cheering section of family and friends. Could that also be a distraction?

**SH:** As far as being home for the Pan Ams I think it'll be great. The biggest

thing will be the atmosphere for us during the Games. As far as off the field stuff it'll be minimal as we'll be staying in the (Athletes' Village) with the team. During the tournament the guys will all be focused on the task at hand and realize the other stuff can wait.

**IFP:** How do you like Canada's chances?

**SH:** I'd have to say I really like our chances based off the pool and our recent trend in international play. I obviously don't know every player we'll have so it's impossible to say, but I'm sure we'll have a strong squad.

## U-17s host Ontario Cup

The Georgetown Mustangs have home-pitch advantage this weekend as the Ontario Cup under-17 boys' soccer playdowns come to Cedarvale Park. Georgetown plays its games on Saturday at 11 a.m. and 2 p.m. and on Sunday at 11 a.m. and 3:30 p.m.

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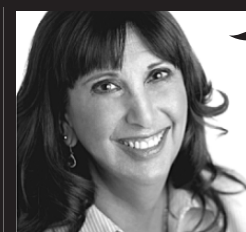
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**Q:** My pain comes and goes for no apparent reason, what can be done to figure it out?

**A:** Physiotherapists are expert detectives when it comes to figuring out pain patterns. It is common for pain from postures or activities to go unnoticed when the individual is concentrating on something else (like data on a computer, conversation or sports). In other cases the painful tissue may lie deep within the body and therefore may not have the pain receptor density that is required to give instant feedback, but is sufficiently sensitive to react to inflammatory chemicals once they have had time to accumulate, often long after the aggravating activity has stopped. This produces a time lapse between the cause and effect making self assessment very difficult. Your physiotherapist is very skilled at identifying these subtle sources of aggravation.



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**Q:** I do not mean to offend but I wonder, why would I pay you for marriage counselling or counselling for myself or my child? Do we not already have that covered with OHIP or through the Canadian Mental Health department?

**A:** This is a misconception that many people have. In a recent article, the Globe and Mail newspaper notes that "although mental illness affects one in five Canadians and costs us \$50-billion a year, we do not provide publicly funded psychotherapy." Many physicians feel obligated to provide counselling to some patients even though they acknowledge that they are not the best people to provide this counselling, because there is a lack of government funded mental health services.

When an individual has a physical illness, all mainstream treatments for as long as needed, are covered by our provincial health plans. With mental illness, however, the treatment provided will largely be decided, not on evidence-based practice, but on the individual's employment benefits and income levels. If it is based on employment benefits, the individual first must be employed full time or be covered under an employed individual and the benefit must cover an adequate amount of counselling. In many cases, the benefit is extremely limited, covering up to only three sessions and the patient does not get to pick their counsellor. In these cases, companies sell their services to employers and want to present the benefit as cost effective. The employer does not realize that for those who actually need the service, this is all but useless.

Some individuals can afford to pay privately for counselling services. They have well-paying jobs. They either pay out of pocket or pay out of pocket and get reimbursed by their employer. They get to choose the counsellor that they want to deal with, based on skill, training, experience and personality.

Finally, there are those who cannot afford to pay for counselling out of pocket and do not have a company benefit. They are put on long waiting list or get no help at all. These wait lists are often months to a year in length. Those able to access government funded services, often find it to be very brief, limited and often no more frequently than once every month or every second month. This is not enough counselling to make the necessary positive impact on the person. As for marriage counselling, that is not seen as a mental illness and so it is not available through government-funded services.

Research shows that mental illness, especially the two most common, anxiety and depression, are a significant burden on the Canadian economy in health-care dollars and lost productivity. Yet nowhere in Canada do provincial plans pay for counselling provided by a private social worker or psychologist. As the Globe article states: "We have the evidence... Why aren't we providing evidence-based care?"

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