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Money Management with Steve Dafoe

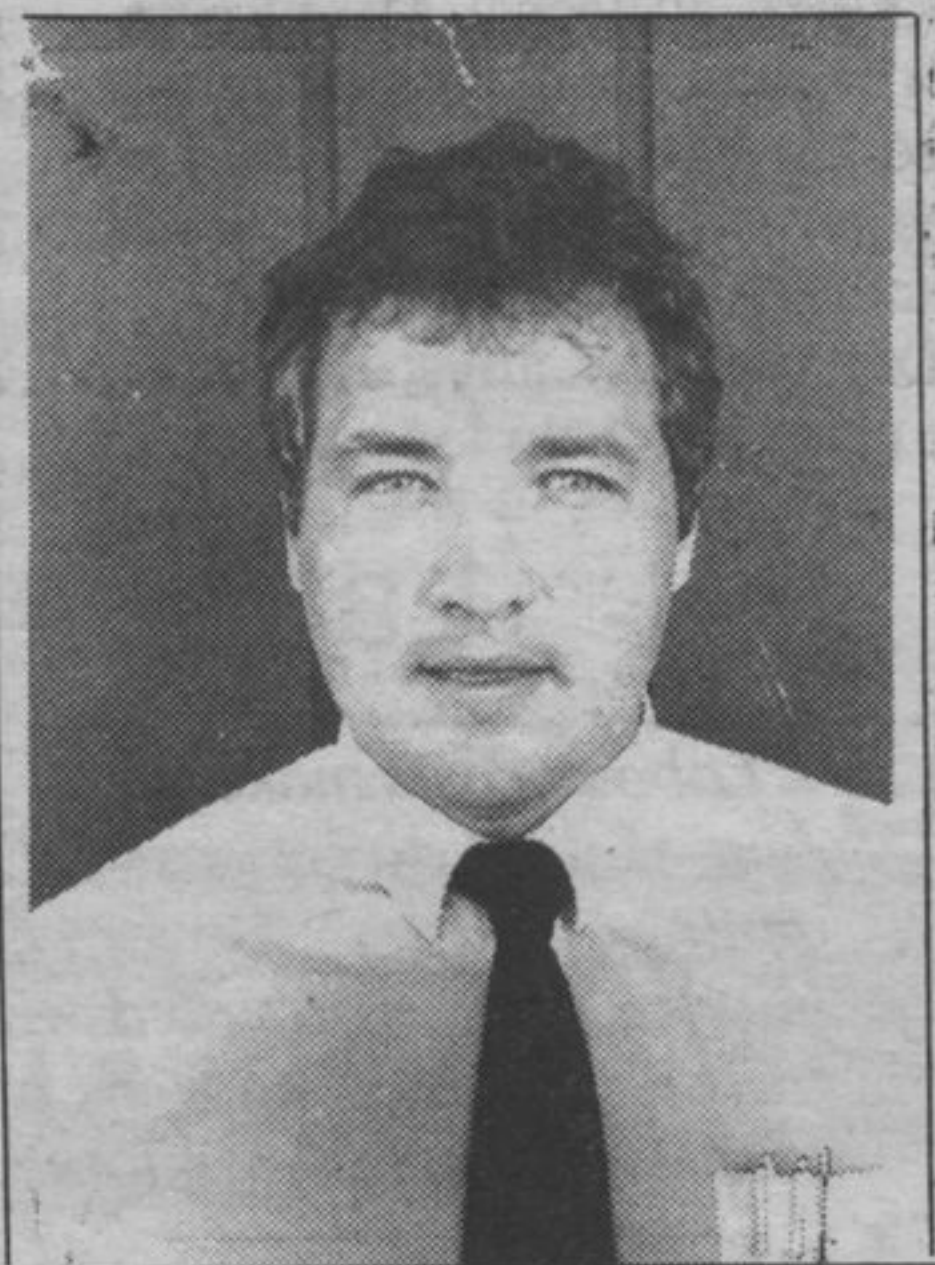
Steve Dafoe is a financial planner with Mutual Life and Mutual Investco of Canada.

He is qualified by degrees in finance, economics and political science. Dafoe was appointed to service the Terrace Bay-Schreiber communities.

He believes the information provided in these articles is an integral part of money management and he hopes that it will provide what he believes is an important service to people in our area.

If you have any questions or would like to write concerning these articles, please contact the News at 825-3747 or write to the News, P.O. Box 579, Terrace Bay, POT 2W0.

Steve Dafoe



Disability Income Planning

A major disability, whether from illness or accident, often forces retirement considerably in advance of your expected retirement age.

This creates obvious problems in planning for financial security. Not only is present income drastically affected but the opportunities available to a disabled individual for providing future income and survivor income for dependents are extremely limited.

For most people there is little or no protection against future inflationary cost of living increases.

The nature of a disability is also important. There is often an increased need for income to defray the costs of medical care and for capital to acquire needed medical equipment and/or to make necessary modifications to a residence or an automobile.

Benefits may be available from public sources such as the Canada Pension Plan, the Quebec Pension Plan, the Unemployment Insurance Commission and the Workers' Compensation Board.

Many people prefer comprehensive disability coverage available through private insurers and as an addition to a life insurance contract.

As is the case with other risks, certain fundamental questions and areas of interest arise. One of the most important features of any disability contract is the definition of the term "disability".

This important provision determines when an individual is considered to be disabled for purposes of collecting benefits. There are essentially three varieties of definition in common use: the "any occupation" type, the "own occupation" type, and the "split definition".

An "any occupation" type defines disability as the "complete inability of the insured to engage in any occupation whatsoever". This approach is rather strict, and insurers have recently defined "any occupation" as the "complete inability of the insured to engage in any gainful occupation for which he (or she) is or becomes reasonably fitted by education, training or experience", or some similar wording.

The "any occupation" approach is the least liberal as far as the consumer is concerned.

The "own occupation" type defines disability so that the insured person is considered disabled when he or she is "prevented by such disability from performing the important duties pertaining to the employee's occupation".

This approach normally is the most liberal from the consumer's viewpoint.

The so-called "split definition" is actually a combination of the two previous types. For example, "total disability" may mean complete inability of the insured to engage in any gainful occupation for which he or she is reasonably fitted by education, training or experience.

However, during the first 24 months of any period of disability, the insurer will deem the insured to be totally disabled if he or she is unable to engage in his or her occupation.

Among some of the other questions concerning disability insurance, the following should be considered:

- are the benefits indexed?
- is the contract cancelable?
- what is the method of calculating benefits?
- what happens if you join a rehabilitation program?
- how is a recurring disability handled?
- at what age is the last renewal available?
- does the premium remain level through the last renewal period?
- does the contract have a waiver of premium provision?
- what are the exclusions?

Attention to detail is as important in insuring a disability risk as it is in insuring other risks.

What do you know about Schizophrenia?

By Hadley Koltun

Mental Health and You is provided as a service of the North of Superior Programs. The purpose of these articles is to inform the community about mental health issues. These articles will cover a variety of mental health issues. If you would like to comment on this article or any of the other articles that have appeared, feel free to write to the News office, P.O. Box 579, Terrace Bay, Ontario, POT 2W0. Any opinions expressed are not necessarily those of the management of the North of Superior Programs.

Please take this short quiz before you read my article this week. See how much you know about this common form of mental illness.

Answer true or false for the following:

1. Schizophrenics are no more violent than other people. T F
2. Schizophrenia is a multiple personality disorder (split mind)- that is, one person can have two different personalities at different times. T F
3. The cause of schizophrenia is usually poor parenting skills. T F

Circle the best answer:

4. Schizophrenia is:
 - a) rare- only one out of 10,000 persons is afflicted;
 - b) uncommon- about one of 1,000 persons is afflicted;
 - c) quite common- about one out of 100 persons is afflicted.
 5. More people in hospital are:
 - a) hospitalized for cancer than for schizophrenia;
 - b) hospitalized for some other condition.
- Schizophrenia is never a reason to hospitalize anyone;
- c) hospitalized for schizophrenia than anything

You were probably surprised to learn that schizophrenia is a common mental illness; in fact, it affects about one out of every 100 persons.

In the United States, over two million people are suffering from schizophrenia and over 600,000 will be treated.

However, it still remains the illness that is least understood. Because it is so misunderstood, we have developed many falsehoods and myths about this illness.

What is Schizophrenia?

Most mental health professionals are hard-pressed to come up with a definition of schizophrenia.

We do know what characterizes it (what its symptoms are) and we do know what schizophrenia isn't.

There are about five basic characteristics of the illness:

friends and family to become absorbed by internal thoughts and feelings (isolation).

The individual's world becomes frightening, unpredictable and painfully lonely.

These are some of the symptoms which characterize schizophrenia. What schizophrenia is not is a "split personality", or a "Dr. Jeckyl and Mr. Hyde" syndrome.

These persons do not have multiple or different personalities

1. Delusion: a delusion is a false personal belief based on an incorrect conclusion about reality.

An example is if someone believed they were Napoleon Bonaparte and they could conquer the world from their home.

Even if someone indicates how unreasonable the belief is, they still stick firmly to it and believe it and even act upon it.

2. Visual and auditory hallucinations: a person may imagine that his thoughts are being spoken aloud or that someone is talking to him who isn't really there (different than talking to yourself which most of us do).

Those hallucinations are of sound or "auditory hallucinations. Visual" or sighted hallucinations are when the individual may see visions (people or objects that are not really there).

Many schizophrenic persons believe that an outside force is

What causes schizophrenia?

This question is even more difficult to answer than the question about what is schizophrenia. Apparently, there is no single cause.

In the 1950s, it was believed that it was the result of poor parenting. More specifically, "momism" was the idea that a cold, domineering, rejecting, but overprotective mother was the cause of schizophrenia.

There is no evidence to suggest that "momism" or bad par-

Answers to quiz

1. True. People with schizophrenia are NO MORE VIOLENT than other people and may, in fact, be less violent. Schizophrenic people are rarely a danger to others. They may be more likely to hurt themselves if illness is acute.

2. False. Schizophrenic individuals do not have different personalities within themselves. The "split personality" syndrome is a symptom of another disorder which is extremely rare and has nothing to do with schizophrenia.

3. False. No one knows for sure what the cure for schizophrenia is. Schizophrenia seems to be the result of a chemical imbalance in the brain. Thus is sometimes inherited. Parents of schizophrenic children should not blame themselves for this unfortunate condition.

4. (c) Schizophrenia is quite common. One out of every 100 persons in the general population is afflicted with it.

5. (c) More people are hospitalized for schizophrenia than any other form of illness, including cancer. It is also the most expensive illness to treat.

out to control them.

3. Numbed or inappropriate feeling: the schizophrenic person often feels a loss of personal identity. It becomes hard to relate to others.

The world seems "flat" or "unreal". Reactions to emotional situations are not right. For example, the schizophrenic individual may laugh in a painful and sad situation. Emotion may even be lacking in other emotional times.

4. Disordered Thinking: the schizophrenic person may be unable to concentrate or make logical connection.

A rapid flow of unrelated thoughts may be reflected by strange speech that makes communication difficult.

5. A Distinct Break in the Individual's Life: a definite behaviour or personality change may occur. The schizophrenic person may withdraw from which suggests a defect in the brain's chemistry.

Further research does suggest that family environments, nutrition and reaction to stress cannot cause schizophrenia but they may be able to bring on or precipitate a psychotic episode.

Therefore, the schizophrenic and his family must do their best to ensure the schizophrenic individual does not experience an excess amount of stress that he cannot handle.

Since schizophrenia is indeed a most-common form of mental illness, we are trying to set up a group support system.

This group would involve schizophrenic individuals, as well as their families and concerned friends.

You do not have to have any affiliation with the Mental Health Program. Confidentiality is guaranteed.

We would like to have a tally of people who are interested before we start the group, so please call either the Mental Health Program offices in Terrace Bay (825-9645), or in Schreiber (824-2597).

Remember, no one needs to feel that they are alone.

Next time I will discuss how schizophrenics can be treated.

Schizophrenia is a common form of mental illness

within themselves. This is an entirely different disorder which is extremely rare.

Another myth is that schizophrenic persons are completely separated from reality. In fact, most individuals are painfully aware of the difference and are quite rational most of the time.

Schizophrenia afflicts all people regardless of race, creed, or colour. It does not affect how intelligent a person is.

The biggest myth to dispel is that schizophrenic individuals are violent. These people are no more violent than other people.

enting is responsible for it. There is however a very strong biochemical and genetic component to schizophrenia.

Identical twins with schizophrenic relatives were raised in separate families with no history of schizophrenia.

These children, more often than not, still develop a schizophrenic illness.

There has also been some discussion by geneticists of a series of genes that may be responsible for this illness.

This genetic or inherited trait may cause a chemical imbalance,