



ANNUAL REPORT

2020/2021

Department of Psychiatry

Dalhousie University, Halifax N.S.



CONTENTS



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For more than a year we have lived in unprecedented times. COVID-19 has, in many ways, shut down life as we know it and crippled the economy. Hundreds of thousands of Canadians lost their jobs and remain out of work, and many more left their workplaces and continued as best they could from home. Though we see a light at the end of the tunnel with the vaccine rolling out, we are still facing uncertainty.

Over the last year COVID-19 stretched our healthcare system thin, but we saw our department members step-up. We saw them adapt. We saw them not only continue to provide high-quality care to the patient population, but we saw them support one another and other healthcare workers. It has not been an easy transition and the Department of Psychiatry is grateful to all its faculty, learners and staff who have made it as smooth as possible.



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This report covers the period of April 1, 2020 to March 31, 2021, with the exception of the education report, which covers the academic year, July 1, 2020 to June 30, 2021. Unless otherwise indicated, photography has been provided by Nick Pearce (Dalhousie) and Kate Rogers (Dalhousie).

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MESSAGE FROM THE INTERIM DEPARTMENT HEAD



This past year will be a year that most of us will never forget: the year that COVID-19 shut down the world and changed our lives. In Nova Scotia we went through two waves and are into a third as the 2020-21 year is ending.

In the first wave we had to rapidly rethink the way we accomplished our clinical and academic work to try and mitigate the spread of COVID. Staff learned how to work virtually where possible, and follow new rules and protocols where it wasn't. We were fortunate to have the first wave end as the summer began and we got a small breather into the fall before a brief second wave began in November. The current third wave is the most severe yet, with projected hospitalizations that will bring us to the edge of our resources. Fortunately, we now have experience, preparation and an organized approach to managing these surges that leaves us poised to bring it under control just as the provincial vaccination effort ramps up.

We have much to be proud of this past year. In education, we discovered how to deliver undergraduate and postgraduate clinical training safely, and after the first wave clinical clerks returned to the hospital for good. We launched our PhD program and have recruited excellent students for our inaugural class.

In research there was a significant move to working from home as researchers had to learn to manage their team and learners from a distance. We held an ad hoc round of DPRF funding for projects related to studying the effects of COVID-19 that created pilot data that enabled success in CIHR competition on COVID-related projects later in the year. Dr. Rudolf Uher became a Tier 1 Canada Research Chair, we are on the verge of hiring a new Sun Life Chair in Child and Adolescent Mental Health, and our research faculty received numerous national and international awards.

Clinically we participated in, and co-led a provincial review for the model of care in community mental health. We supported a well-received external review of the East Coast Forensic Hospital (ECFH), transitioned to a new interim leader in Dr. Risk Kronfli and obtained provincial funding to hire a new Clinical Director for ECFH.

Administratively, department leaders took on a number of ambitious projects. We managed to operationalize our new strategic plan pulling on input from across the department. We

created a formal interview process for hiring new faculty and developed a system of orientation to get them started on the right foot. We held a very successful job competition in the fall, retained most of our graduating residents, and filled our staff complement for the first time in years. We are preparing to launch a mentorship program to continue to support our new faculty as they start their careers. We held a holiday party virtually including the customary resident and staff skits. We created a new position to support our new strategic direction of social policy and advocacy. We created a wellness committee that will propose wellness goals as part of our strategic plan. We revamped our IPP process to make it more streamlined, aligned with our strategic plan, and to encourage faculty input. I was so proud of what we were able to accomplish together.

So despite a challenging year, I'm left with mainly positive memories. I'll remember how strong government leadership partnered with robust public health efforts, a creative and rapid response from health care providers, and a sensible and compliant public made Nova Scotia one of the best places in the world to live through this past year. I'll remember how the crucible of COVID-related planning drew leaders closer together at the provincial table, within the zone, and within the department. I'll remember how our faculty rose to the challenges of this year to continue to provide high quality mental health care, and how our researchers had one of their most successful years ever with our grant funding at an all-time high. I'll remember the incredible year we had in recruiting, attracting 10 new psychiatrists, a new researcher and a new department head despite the barriers this year posed.

While so much of the world seemed to be in limbo, we grew stronger. Now we head into a post-COVID world with renewed faculty, renewed leadership, and renewed vigour. A year to remember indeed.

Dr. Jason Morrison, MD, FRCPC
Interim Head, Department of Psychiatry, Dalhousie University
Interim Chief, Department of Psychiatry, NSHA Central Zone



A YEAR IN REVIEW

The Department of Psychiatry is a clinical academic department within the Faculty of Medicine at Dalhousie University in Halifax, Nova Scotia. We're home to nearly 250 faculty located across the province, country and even some around the world. Locally, faculty work out of the Queen Elizabeth II (QEII) Health Sciences Centre, the IWK Health Centre, the East Coast Forensic Hospital (ECFH), the Nova Scotia Hospital, the Operational Stress Injury Clinic, and various community clinics across the Central Zone.

Research

\$8,547,498 in new grant money
\$22,026,116 in continuing grant money

30 faculty members were actively engaged in research.

A total of **101** peer reviewed journal articles, **25** abstracts, **10** book chapters were produced by faculty

A total of **111** students were supervised for various research projects: **27** undergraduate, **34** master's, **3** research in medicine, **39** doctorate, **8** postgraduate fellows

Education

43 residents received **528 hours** of instruction from **62 faculty** members

8 applicants matched in the first round of CaRMS, including **3** Dalhousie graduates

3 child and adolescent psychiatry subspecialty residents

37 rounds sessions; **10** by invited speakers

2 faculty workshops

1 annual conference (Academic Day)

Curriculum development and scholarly work

\$3,425 in medical education grant funding received

10 scholarly posters presented at various conferences

3 scholarly articles published

11 residency scholarly projects on medical education

249
faculty members

21
cross-appointed faculty

17
adjunct faculty

Photo by Gustavo Fring from Pevels

Patient Care

88,277 days were spent in adult inpatient services

82.5 per cent occupancy rate in adult mental health and addictions services (including ECFH)

1,813 discharges from adult inpatient care (includes 150 from ECFH)

124,897 visits to adult outpatient services (does not include Mental Health Mobile Crisis Team and Psych ER)

22,546 Mental Health Mobile Crisis Team interventions for clients in the Central Zone

2,325 visits to the Psych ER

4167 days spent in child and adolescent acute inpatient services

74 per cent occupancy rate in child and adolescent acute inpatient services

259 discharges from child and adolescent acute inpatient services

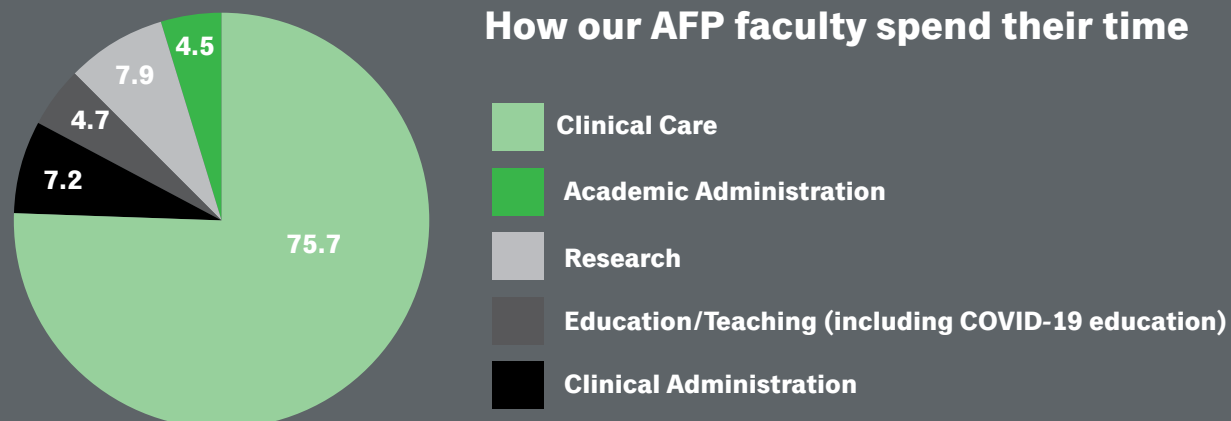
2409 days spent in child and adolescent residential inpatient services

59 per cent occupancy rate in child and adolescent residential inpatient services

40 discharges from child and adolescent residential inpatient services

50,325 visits to child and adolescent outpatient services

How our AFP faculty spend their time



MISSION STATEMENT IN ACTION

The Department of Psychiatry's mission is to improve the mental health of society and advance the field of psychiatry through education, research, advocacy, and psychiatric care. Here we highlight some of our faculty who are bringing that mission to life.

This year those involved in education, research, and clinical care were all forced to pivot to face the challenges presented by the COVID-19 pandemic. Below you will learn how members of the department were successful in doing so.



Faculty and residents meet virtually during CaRMS in March 2021.

education: the brisk shift to virtual learning

Teaching virtually is not a new concept, with online learning growing in popularity over the last several years. Having to switch all teaching to virtual sessions overnight is a completely different beast. When the pandemic hit in late March 2020, the Department of Psychiatry was forced to ensure learning continued and in doing so, had to shift to an almost entirely online platform. Our undergraduate, postgraduate, graduate, and continuing professional development (CPD) programs successfully made that shift with the steadfast assistance of the administrative support team and flexibility of faculty and learners. More than a year later, most learning continues online, and we have adapted, and even embraced this new normal.

No one could have predicted what we have faced over the last year. When things deteriorated quickly in winter 2020, our CPD programming transitioned immediately to online. Because our rounds sessions were already delivered virtually, as well as in person, this change was nothing extensive, moving only from Skype for Business to the Zoom platform. Dr. Lara Hazelton, director of CPD, worked with education coordinator Tracy Fraser Maclsaac to ensure a smooth transition.

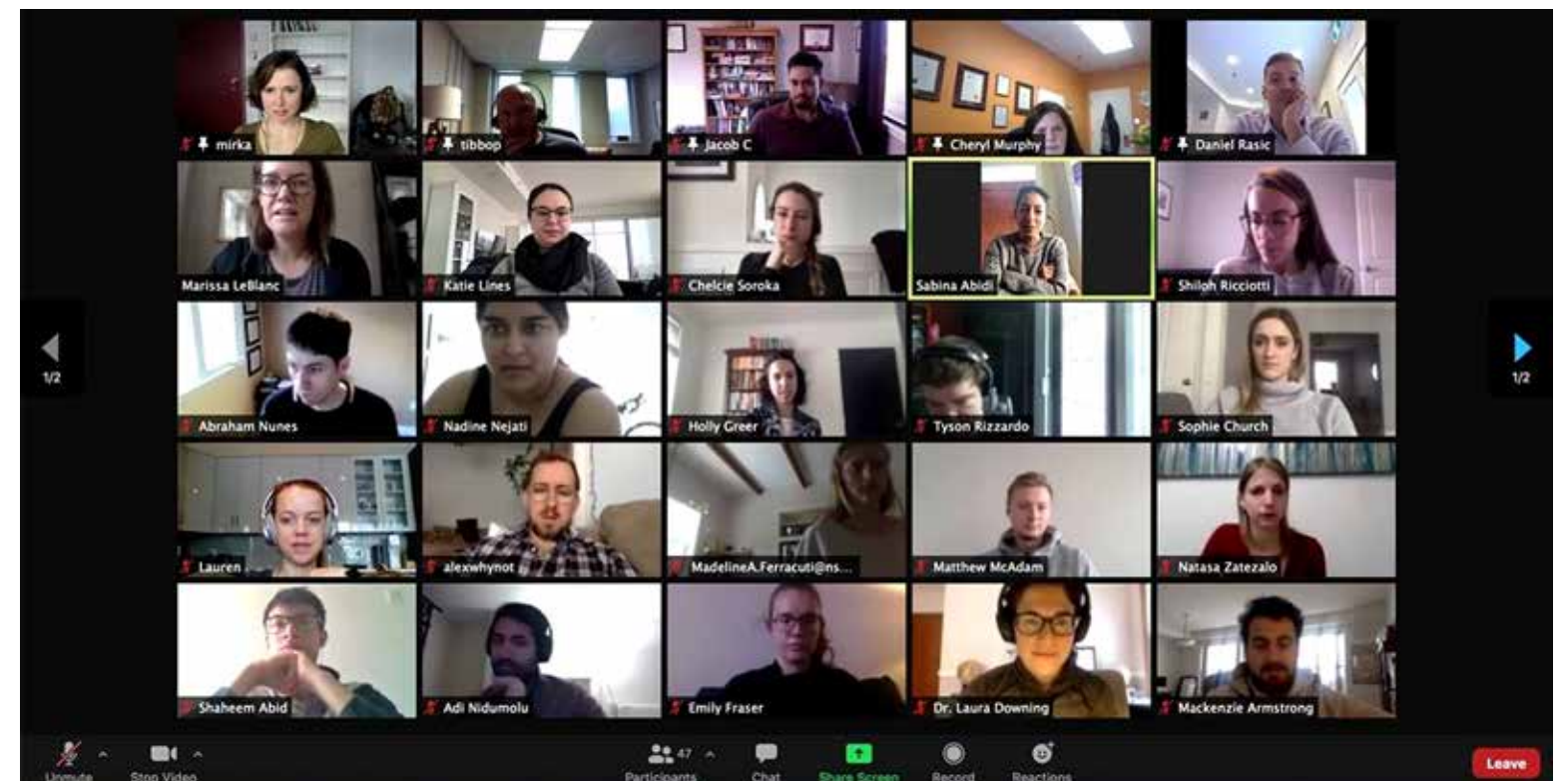
When the Dean of Medicine, Dr. David Anderson, determined all core and elective students should be released from all clerkship activities on March 18, our undergraduate education team had to begin the complicated process of moving a completely in-person program to virtual learning. With the assistance of our

undergraduate coordinator, Kelly Hancock, and MedIT, our Med 1 and 2 lectures and tutorials were transitioned to Microsoft Teams, necessitating many changes to our scheduled programming. Some things simply could not continue virtually and various previously scheduled events and programs had to be cancelled including: Med 1 & 2 clinical electives; the LINK program, a partnership with the Global Health Office and International Medical University (IMU); our dementia workshop; the Summer Internship in Psychiatry (SIIP) experience; ECT observation for Med 3s; and Med 4 core and visiting electives.

From the earliest days our undergraduate team looked forward and planned for an eventual resumption, even with no return date. That day would be June 8, 2020, but it required both a modified structure and schedule. Call was redesigned to accommodate space limitations and align with new resident call requirements.

A number of supplementary and complementary experiences were introduced for the clerks including the resident mentorship program, weekly office hours and end-of-rotation exit interviews with the clerkship director. Clerks also had the opportunity for optional learning experiences in early psychosis and forensic psychiatry. Skilled Clinician was redesigned to be delivered entirely online, with our faculty and residents playing an integral role in its success.

Our postgraduate program, including 41 residents and three subspecialty residents, also saw formal academic curriculum move to a virtual platform. With the assistance of the administrative staff, particularly Jennifer Brown, it was quickly determined that Zoom would be the most efficient option for hosting postgraduate curriculum delivery. For the most part, resident training continued as planned. Rotation supervisors were responsible for ensuring



Residents and faculty meet over Zoom for the annual Resident Retreat.

residents were able to continue to participate in delivery of clinical care, whether direct or virtual, with very few changes required to the rotation schedule. Even some of the components of the program that initially seemed very challenging, such as delivery of STACER and OSCE examinations, were able to be delivered virtually under the guidance of our administrative staff. All other aspects of the program, including resident orientation, examinations, graduation events, and CaRMS have been delivered virtually this year.

In our graduate program, the story is similar to the other areas, with classes being moved online. Student research projects required modification for a virtual environment in cases where they were not able to move on to data analysis and writing with the data collected prior to lockdown. For the incoming students, we needed to ensure their project idea could be completed online and if not, that they develop a concept for virtual research. All students and supervisors were approached to confirm they had the supports needed to continue virtually. For the fall 2020 semester, online classes were scheduled at appropriate times for students in different time zones, given not all were in Halifax. With the assistance of the Faculty of Graduate Studies, our graduate coordinator Hillary Yuill, and our very flexible faculty, particularly Drs. Igor Yakovenko, Kim Good and Candice Crocker, we were able to move everything online successfully and no curriculum had to be missed. We held thesis defenses, new graduate student orientation, thesis committee meetings, student progress meetings, graduate program committee meetings, and even Psychiatry Research Day all over Zoom.

Though generally the transition to online learning was smooth, it has not been without its challenges. Zoom fatigue has been problematic, with residents and graduate students finding a full day of online learning tiring and difficult to maintain attention. Some faculty have also found online teaching tough, noting it can be harder to engage learners and provide interactive educational opportunities. The most notable challenge with the pivot to the online platform however, was how quickly everything had to change and all of our educational programs faced the uncertainty and pressure that came along with this.

Despite the challenges, our programs, staff, faculty and learners have shown resilience. The resounding feeling is one of satisfaction, as teams rallied together to overcome the obstacles

they faced. "It was so rewarding watching how enthusiastically, capably and willingly our faculty, staff and residents jumped in and helped us innovate and strategize," says Dr. Cheryl Murphy, director of undergraduate education. "This allowed us to continue providing a high standard of education to our medical students." Dr. Mark Bosma, the director of postgraduate education, echoes that sentiment and says "working together to solve the challenges posed by COVID has been rewarding." And in our graduate program, program coordinator Dr. Sherry Stewart says, "the teamwork involved in moving everything to a new environment and the successful graduation of six of our master's students last fall after defending their theses online was so great to see."

In CPD, though the 2020 W.O. McCormick Academic Day had to be cancelled, rounds attendance has actually increased during the 2020-2021 academic year, with more faculty and learners able to attend from their homes or clinics. Speakers not residing in the city, or even the province or country, have become more accessible options for presenting and faculty workshops have been well-attended. As Dr. Hazelton looks towards the 2021-2022 academic year, she says what will return to in-person learning remains a question. "While we plan to have some visiting speakers come visit Halifax so they can interact with our faculty and residents," she says, "we will have to decide to what extent we resume in-person activities."

The methods of program delivery and learning have certainly changed over the last year. Some changes are inevitably temporary, others, like those already mentioned in CPD, may be here to stay. Academic events and meetings may very well continue virtually, eliminating the need for participants to travel, improving efficiency and engagement. Our graduate virtual defenses have permitted students to benefit from the expertise of remote experts in their field, a method we may allow in the future. The resident-developed mentorship program in undergraduate education was very well-received and will likely continue, as well as office hours and exit interviews. Beyond these changes, we have seen among staff, faculty and learners alike, the ability to pivot. The ability to quickly shift from what we know in order to ensure we maintain the high calibre educational programs everyone in the department is so used to. We have seen resilience and drive. While some program changes may be temporary, these are qualities we know are not, and will continue long after the COVID-19 pandemic is no longer our current reality.

research: succeeding virtualising and finding funding during COVID-19

When the COVID-19 pandemic hit our province and Dalhousie University shut down, our researchers were perhaps some of those most drastically impacted. In late March 2020 Dalhousie moved to an entirely virtual environment. Access to campus buildings was restricted to those with special permission. Among those included in this group were those working on essential, exempted research or approved special projects, such as COVID-19 research. Communication received widely by researchers was that all campus-based research be suspended as of March 24. Those working on time or resource sensitive critical projects, or those that were deemed critical or life altering could also apply for permission to continue.

A month into the pandemic Dalhousie began planning for a phased return to research, but it wasn't for many months, in November 2020, that the many researchers were approved to return. Now, well into 2021 and plans are still ongoing for the gradual return to campus.

For those approved to continue ongoing research, adjustments had to be made.

Dr. Rudolf Uher: Families Overcoming Risks and Building Opportunities for Well-being (FORBOW)

When the pandemic hit, Dr. Rudolf Uher had to make a case to continue his work. FORBOW is a long-term study of families where one or both parents are living with severe mental illness with the aim to identify the risk of children developing mental illness early and modify it through early interventions. "It was clear that following our families through this time was more important than ever," recalls Dr. Uher. "Some of our activities, for example the delivery of early interventions, were recognized as life altering and were allowed to continue without interruption." He and his team developed alternatives to face-to-face meetings, including videoconferencing, but were allowed to continue meeting with participants when it was needed. There were parts of the program, such as the behavioural assessment with toddlers and preschool



Recipients of COVID-19 grants (L-R) Drs. Rudolf Uher, Gail Eskes and Normand Carrey.

children, which simply could not continue because they involve close contact and interactions.

Dr. Gail Eskes: Can Brief Mindfulness Training Enhance Working Memory Practice in Healthy Older Adults?

This DPRF-funded study aimed to look at how mindfulness and working memory training interact to improve cognitive abilities in older adults. When the pandemic hit, Dr. Eskes, along with co-investigators Drs. Ryan Wilson, and David Whitehorn, and Mr. Richard Drake, moved the study entirely online. They were fortunate to already have web-accessible assessment and working memory training tools in place, but had to develop procedures for remote informed consent and administration of neuropsychological tests, as well as re-program other outcome tests for web-based data collection. They also adopted the use of REDCap (Research Electronic Data Capture), which is an NSH and Dal-approved method of secure data collection and administration of questionnaires, surveys, and email communication with participants. While data collection has been delayed by the need for remote data collection, one advantage of these changes is that this study is now accessible to volunteer participants from all parts of Nova Scotia.

Dr. Sherry Stewart: Univenture & Canadian Underage Substance Prevention (CUSP) trial

Dr. Sherry Stewart had to pivot two separate trials during the pandemic. Under her direction, The Social Sciences and Humanities Research Council (SSHRC) Partnership-funded *Univenture* project is designed to adapt an existing effective intervention for substance misuse prevention in adolescents to the emerging adult developmental period, and to test this intervention in a randomized controlled trial for its efficacy in reducing substance misuse and increasing mental health among university students at five campuses across Canada. The other is a CIHR project grant called the *Canadian Underage Substance Prevention (CUSP)* trial. Dr. Stewart is site lead for Nova Scotia, which is one of three CUSP sites across Canada. The purpose of the CUSP project involves implementation science where the team is studying the best way to disseminate their effective substance misuse prevention program, *Preventure*, into schools across Canada. Nine schools in Nova Scotia have been recruited to participate. When the pandemic hit, Dr. Stewart and her team on the *Univenture* project were forced to move all in-person

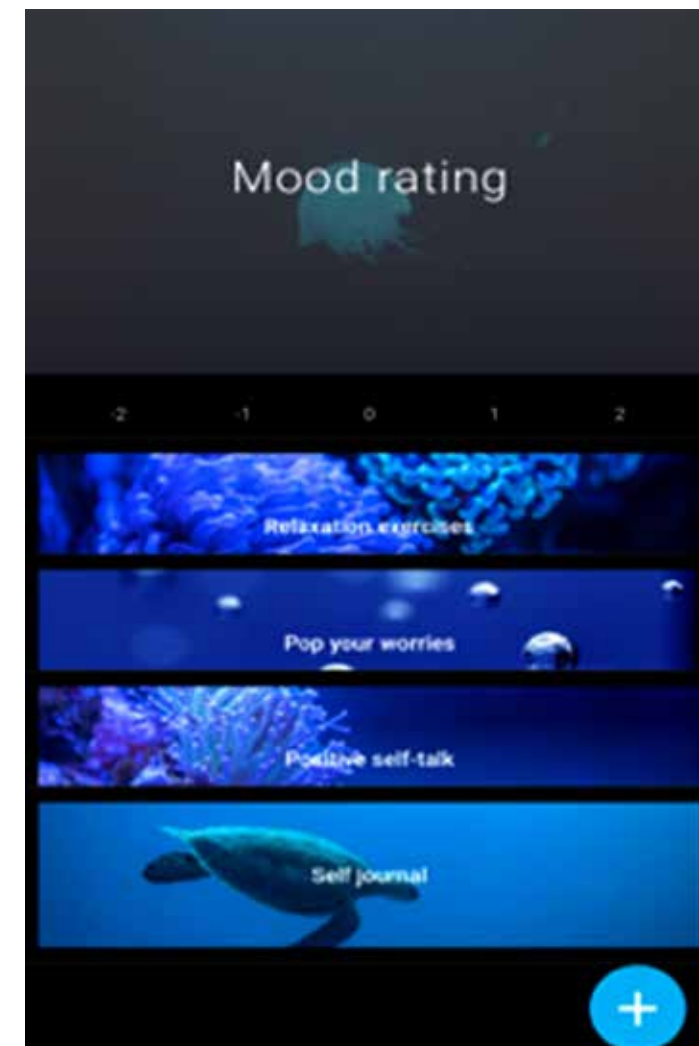
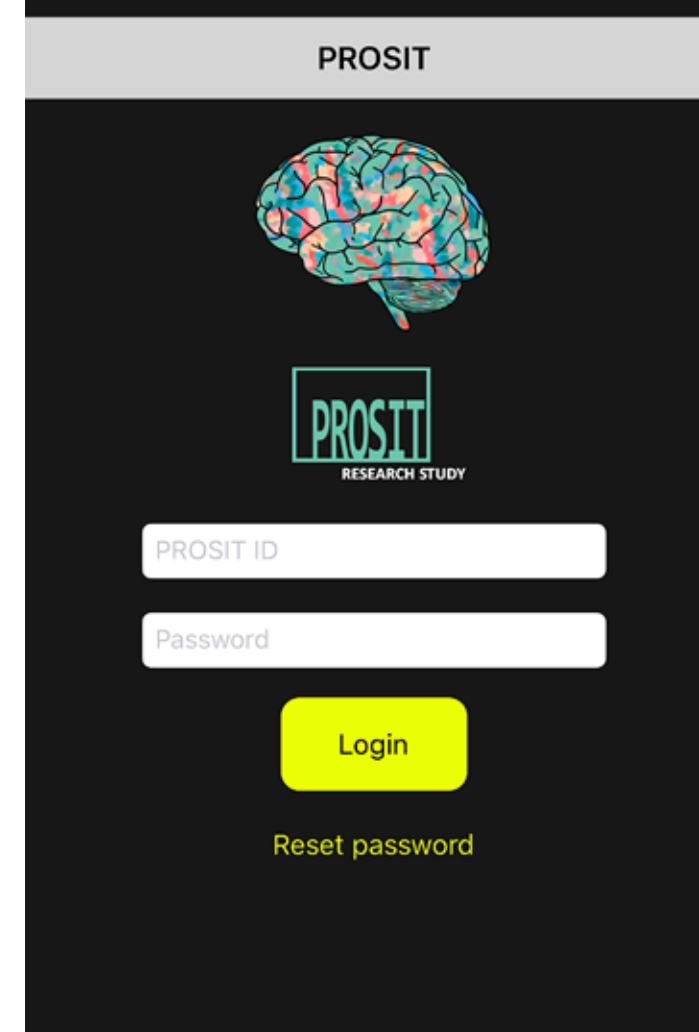
interviews online, requiring ethics amendments and selection of a secure platform for sensitive interviews. The adaptation of the *Preventure* manual for this project, which took place in Montreal, was also slowed with the lengthy lockdown faced in the area. The team was also required to find alternative recruitment methods, as some partners were no longer able to assist in the planned manner, facing their own challenges with the pandemic.

For CUSP training of intervention facilitators was moved to an online training model, as did the intervention delivery model. The team obtained additional funding to facilitate this shift in delivery modality and to study feasibility of this delivery model in a project called OPfS (Online *Preventure* feasibility Study), for which Dr. Stewart is the Nova Scotia site PI. They are in progress of collecting data from 90 students with whom they are pilot testing the online delivery model and collecting both feasibility and pilot outcome data.

Unfortunately, Dr. Stewart faced some additional snags late in 2020 when she learned that the Halifax Regional Centre for Education (HRCE) had decided to forgo any involvement in research for the year due to challenges with the pandemic. As a result the team has not been able to either collect data or train facilitators at the six partner schools in the HRCE. They also were unable to complete pilot testing of the in-person arm of the *Univenture* trial, as most universities were closed to in-person research.

Dr. Sandra Meier: Predicting Risk and Outcomes of Social InTeractions (PROSIT)

For Dr. Sandra Meier, whose research focuses on leveraging technologies for the provision of clinical care among youth, the challenges during the pandemic were mostly related to quickly adapting the size of the lab to growing demands of patients and the general public. Because the intention was always to make their research easily accessible, she and her team focused on online formats already prior to the pandemic. In particular, they create novel mobile apps for clinical monitoring and low intensity treatment interventions. Some tools, however, are paired with wearables that are lent to youth, which was not an option during the pandemic. There were also select participants who struggled with online instructions and would have benefitted from some in-person introductions that were not able to happen, limiting them from completing their participation.



During the pandemic Dr. Meier's research capacity greatly increased as she went from two lab members to 15. "Integrating all these new staff was a bit challenging at times," she says. "During the pandemic we also recruited nearly 3,000 people to our various studies and we had to monitor many of our patients over multiple weeks to ensure their safety, which resulted in a very high workload."

Though the pandemic created challenges for those in the midst of research, it also created opportunities for grants and new projects. Several faculty members received funds for research related to the COVID-19 pandemic.

Dr. Normand Carrey: Virtual care compared to in-person delivery of child and adolescent mental health services during the COVID-19 Crisis; a mixed method analysis in real time

Dr. Normand Carrey, along with various co-applicants including department members Drs. Jill Chorney, Sandra Meier, Selene Etches, Herb Orlik, Sabina Abidi and Alexa Bagnell, submitted a grant to the Department of Psychiatry Research Fund (DPRF) for a project that would examine the process and outcomes of face-to-face and virtual delivery of services to the child and adolescent population. Dr. Leslie Anne Campbell, another co-applicant, and the team subsequently were able to obtain CIHR funding with the same theme, but broadening the scope to include all services and to assess the impact of the pandemic on child and adolescent mental health, including access to mental health and addictions services.

Dr. Carrey and his co-applicants are hoping to use the findings from the study to inform how we integrate virtual care into mental health and addictions care for children, youth and their families. "Virtual care can provide families with more choice in deciding what we call the mode of delivery," says Dr. Carrey. "We will have quantitative data to show that patient outcomes are just as good if not better than usual face-to-face care—of course this is a hypothesis to be tested." They are even more interested in what fits for who and under what circumstances. Embedded in both the DPRF study and the CIHR study are qualitative approaches that will help them understand what barriers stand in the way of uptake and what implementation strategies would be the most effective.

Dr. Carrey and his colleagues have received IWK research ethics



Dr. Gail Eskes (right corner) meets virtually with her research team: (clockwise from top left): Richard Drake, co-investigator and current graduate student in the PhD program in Psychology & Neuroscience; psychologist in the Department of Psychiatry, Tammy Lamb; research student, Jenna Parsons; and research assistant Adith Muddaraju. A snapshot of the working memory training program (N-Igma) is seen in the top left corner.

board approval and are ready to move forward with study roll-out. They hope to get some preliminary results that they can share with colleagues, staff and families in the near future.

Dr. Sherry Stewart: (1) No Exit: A longitudinal study of personality and social contagion effects on maladaptive affective, behavioral, and cognitive responses to COVID-19-related quarantine in romantic couples. (2) Covid-19 pandemic: Factors that support and impede family well-being during mandatory homeschooling. (3) Personality as a predictor of emerging adults' poor adherence and psychological distress to public health measures for controlling COVID-19 viral spread: Empirical evidence and intervention efficacy.

Along with maintaining her ongoing research, Dr. Stewart received three grants related to COVID-19 research. The first, a DPRF-funded project examines the mental health and addictive behavior effects of lockdown on couples who were isolating together during the pandemic, while also examining social contagion of fear and maladaptive behaviors across couple members during this time. She and her team hope to contribute to the understanding of the adverse effects of lockdown on people's mental health and substance use to inform intervention efforts. Examining this from a couple's perspective can help inform whether solutions also need to be targeted towards couples rather than individuals.

While working on the DPRF grant, Dr. Stewart and her colleagues

included some questions on homeschooling, given this was one of the stressors that couples were facing during the lockdown across Canada. "Some very interesting preliminary findings emerged and we decided to study this in more depth by applying to the SSHRC PEG," says Dr. Stewart. "Along with our partner the Canadian Centre on Substance use and Addiction (CCSA), we successfully secured funding." This project aims to examine the consequences of mandatory homeschooling during the pandemic on couple's mental health, addictive behaviors, and children's mental health. They hope the findings will be useful in informing the debate about whether to close schools during any future waves of this pandemic or future predicted pandemics, and to determine the mental health supports homeschooling parents and children need.

The final grant is from the CIHR and examines the effects of personality on distress during the pandemic and on adherence to public health strategies for viral containment. This project also aims to obtain pilot data on the impact of a personality-targeted intervention on distress and adherence outcomes among university students. Having already been funded by the SSHRC for studying the effects of a personality-targeted coping skills intervention (Univenture) on undergraduates' substance use behaviors, when the pandemic struck, Dr. Stewart applied for add-on funding that would examine the links of personality to both pandemic-related distress and lack of adherence to public health guidelines. It would also extend the examination of Univenture intervention effects to outcomes of reduced pandemic-related



Dr. Sherry Stewart (top row, second from right) joins members of her MAAC (Mood, Anxiety, Addiction, and Co-morbidity) lab team via Zoom.

distress and increased adherence to public health guidelines. She hopes to contribute to the understanding of young people are at greatest risk during a pandemic, and what interventions might be helpful for reducing distress and increasing adherence behaviors.

Data for the DPRF grant has been collected, with one publication in press and several others in progress. The project will be completed by June 2021. The SSHRC PEG project has launched at several sites in both Canada and the US that had pandemic-related mandatory homeschooling this term, with an end date of August 2021. The CIHR-funded project is well underway with two papers in progress, and survey data analyses currently taking place. Like the SSHRC grant, this project will also wrap up in August 2021.

Dr. Sandra Meier: COVID-19 - Social Distancing and Mental Health

Dr. Sandra Meier received several grants for her pandemic research, most notably a large sum from the Nova Scotia COVID-19 Health Research Coalition. Her research focuses on how the pandemic and the public health measures in place affected people's daily routines and how these changes are impacting mental health. She also hopes to learn whether people found a way to counterbalance the negative impact of the pandemic.

Dr. Meier is motivated to boost resilience among the population.

"I am mostly interested in helping people to better self-manage their mental health by showing them how their behaviours relate to their mental health and how they can positively intervene in this cycle," she says. "Being able to provide people with a feeling of self-efficacy is my major goal, especially now when a lot of things seem to be beyond their control."

Dr. Meier's research has been underway since May 2020, with work to be completed by June 2021.

Dr. Rudolf Uher: Impact of the COVID-19 pandemic on Canadians living with mental illness, and their children

Dr. Rudolf Uher received funding under the first federal competition for COVID-19-related research, the COVID-19 Rapid Research Funding Opportunity. Building on his work with FORBOW, the focus of his study was on the mental health of parents and children during the pandemic. "The mental health of children always depends on the mental health of their parents," says Dr. Uher. "With schools closed and peer contacts restricted during the early stages of the pandemic, the wellbeing of children and young people may depend more on parents than at any other time in recent history." The FORBOW team was interested to follow the participating families through the pandemic to track the effect on their mental health and to find out what factors support wellbeing at times of crisis.

This project has been largely completed, with more than a thousand interviews with parents, children and youth about their mental health and their experience of the pandemic taking place between May 2020 and April 2021. To ensure information was gathered safely, Dr. Uher and his team utilized videoconferencing for assessments, as well as protocols for safe in-person visits at study sites.

For those of us who have been fortunate enough to continue working over the last year, it has not been without challenges. Researchers and their teams have been under considerable stress as they worked to navigate this new virtual world. The lack of in-person collaboration, as well as face-to-face participant contact is a difficult reality, as is the struggle to maintain motivation and momentum. "Nothing seems quite as easy to get done as it was pre-pandemic" is a common opinion among our research teams, but they have accepted this. "It is ok that our research is not running smoothly, it is not simply realistic given all that has happened," says Dr. Meier. "We have to cut us all some slack and just try our best."

Amidst the chaos, however, we have been lucky enough to see some positive changes. "New opportunities have presented themselves," says Dr. Stewart. "We have had the chance to have our research become more relevant to finding solutions to the psychological suffering that many have experienced during the pandemic." She, and others, also recognize the resilience of students and staff, and the motivation their teams had to work together. "It was a real test of research teamwork," says Dr. Eskes. "I think we have learned a lot and are all better researchers for it."

Perhaps even more rewarding were the stories of success from study participants. "Some of our youth were not doing well and they wrote to us how much it meant to them that we assessed how they were doing and provided them with resources," says Dr. Meier. "Some of them even indicated that they are in therapy now, which they would not have considered without their positive

experiences with us." Dr. Uher and his team also found some positivity during the difficulty of the pandemic and he recalls how nice it was hearing how some of the most disadvantaged families turned the situation into a positive experience, got closer and enjoyed spending more time together as a family.

When we look back on this time there is no doubt we may grimace and remember the lockdowns and the days, weeks, months, and now years, when life felt anything but normal. But we may also remember that it forced us to pivot. It broadened our minds and created opportunities to study an unconceivable situation. It forced us to find new ways to reach our goals. Many of the online data collection tools, virtual interviewing techniques, and other communication technologies that allowed our departmental researchers to continue their work during the pandemic, will continue to be used when the day finally comes when we get back to 'normal,' whatever that may look like in the future.

clinical care: supporting patients and each other through the COVID-19 pandemic

March 2020. When we look back years from now we will all remember that month. We will remember it was when the world shut down. We will remember it was when life as we knew it, stopped, and we were forced into the so-called 'new normal,' lasting far longer than any of us anticipated. On the inpatient units at both the Abbie J. Lane building and the IWK, staff and patients alike were forced to quickly adjust to functioning in a hospital during a pandemic, and they will all tell you, it wasn't easy. The outpatient clinics faced an entirely different set of challenges, as they managed the new world of virtual patient care. Months have gone by and physicians and support staff continue to provide the highest quality of care to their patients. Things have

settled into something resembling a routine, but as we reflect, we remember the frenzy of the first few weeks.

By week two of lockdown in late March 2020, the directive was given that all available physicians were required to carry-out essential services, as faculty risked encountering COVID-19-positive patients and potentially developing their own symptoms. The IWK forged ahead as their services moved quickly towards virtual care. Very early on all ambulatory, residential, and day services, moved to a virtual care model. Face-to-face services were offered where necessary in the urgent care clinic, as well as in emergency mental health and addictions services and consultation liaison. In inpatient services, they aimed to discharge



Residents Drs. Shiloh Ricciotti and Kate Szymiest share a socially distanced highfive on the inpatient unit.



Jeff Toth, registered nurse at the Operational Stress Injury Clinic works with a patient (photo credit: Patrick Daigle)

those patients they could, and always use social distancing and PPE (personal protective equipment) for those who remained.

In adult services, in response to a wider pandemic plan, the department made several changes. To reduce the number of patients in hospital, we moved to discharging as soon as possible and modifying passes on long-stay rehab units, so patients were with family rather than staying in hospital. Passes were restricted on inpatient units for the remaining patients to reduce any chance of outside contamination with the virus. At the East Coast Forensic Hospital (ECFH) no external passes were offered due to concern of COVID-19 spreading in the adjacent correctional population. The inpatient unit on 6 Lane was set up to be ready for COVID-19 patients. All non-urgent face-to-face visits in outpatient services were moved to phone-based support, and eventually virtual care with the introduction of Zoom for Healthcare. A reduction in daily in-house staffing on outpatient teams was made to limit potential person-to-person spread.

As we approached the end of April, it seemed an earlier inpatient plan to restrict admissions to one site with isolation and precautions was working. Swabbing of new admissions who were unable to give a solid history and isolating them until the

test results returned was successful. Outpatient services were primarily conducted by phone or video, and clinicians able to work from home were doing so. Face-to-face visits continued for antipsychotic injections, and many new assessments, especially those that were acutely or sub-acutely ill, such as ER assessments, and patients recently discharged from hospital.

Staff in both inpatient and outpatient services went above and beyond during this time. On the inpatient units, Dr. Sanjana Sridharan, deputy clinical director of acute care, and her team were spread thin as they managed their usual patient load, as well as all things COVID-19-related. Staff were under enormous pressure, with many facing burnout. "It was exhausting with the PPE and rapid turnover," says Dr. Sridharan. "We had a lot of sick calls and a few of our nurses moved to other jobs within NSH." In particular on 6 Lane, there was an increase in acuity, as well as in patient turnover because it was a COVID-19 designated unit.

The rules and restrictions were subject to constant change. Despite the challenges, there was an increase in comradery as inpatient teams worked together to enhance patient care. "We were more collaborative and watched out for each other more than we ever had to," recalls Dr. Sridharan. Working hard to keep morale high, they initiated a COVID-19 challenge to motivate each other to exercise and eat healthy, and had weekly events and gift card giveaways.

In the outpatient clinics, deputy clinical director of community mental health Dr. Sonia Chehil and her teams worked hard to accommodate their patients virtually. Though the shift happened quickly, it was a monumental task to ensure everything went smoothly. And where the inpatient team grew closer as they faced the COVID-19 challenges, the outpatient teams struggled to maintain connections, with many colleagues working from home. "We had to figure out how to support one another when we were no longer in the same space," says Kim Flemming, program lead for Community Mental Health and Addictions in the Central Zone. "Hallway conversation with a colleague is often an important means of self-care for clinicians who engage with really challenging clinical situations." Many of the most vulnerable patients also lacked the technology required for phone or virtual consults. Thanks to support from both the Mental Health Foundation of Nova Scotia and the province, cell phones were provided to this specific group to ensure they continued to safely receive care.

Though staff in the outpatient clinics faced Zoom fatigue and challenges feeling connected, there has been overwhelming positive feedback about the flexibility virtual care has provided them. "I hear that has been something that has helped clinicians cope during difficult times or when childcare was uncertain or kids were homeschooling," says Ms. Flemming. "Many felt it was a saving grace at the peak of the pandemic to be able to attend to the challenges the pandemic created in their home life and still maintain their work obligations." There was also much resilience and adaptability among the teams to increase remote care, a silver-lining in all of this according to both Dr. Abraham Rudnick, clinical director of the Operational Stress Injury Clinic, and health service manager Patrick Daigle. "Team members have been so flexible in the hours they work to ensure clients can be met remotely," says Dr. Rudnick. Clinicians are seeing the benefits of technology for delivering evidence-based care and the additional choices it allows them to engage with clients. A much needed shift according to most, and one that is likely here to stay.

With the summer months of 2020 came some reprieve for Nova Scotia. Enhanced testing protocols showed the virus was not spreading through communities. Restrictions in acute care began to be rolled back, with beds that had been reserved for COVID-19 patients opening up. Staffing in emergency began to resemble something more normal, rather than the skeleton crew that existed to limit contact.

Looking towards a potential second wave in the fall, interim department head Dr. Jason Morrison and other clinical leaders prepared for what that would look like: outpatient teams would continue virtual care; admissions would be made on both 6 and 7 Lane; extra nurses would be dispatched to acute care at the Abbie Lane; and ER staff could be redeployed to the Abbie Lane if necessary.

The preparations were needed as the second wave surged in November. All staff providing face-to-face care were required to wear a face shield and a mask. Luckily things settled quickly and in 2021 we began to see our physicians included in the vaccine roll-out. We are certainly not out of the woods, but we look towards summer and fall of 2021 with optimism, hoping with more and more of the population receiving vaccinations that we may get back to something that resembles pre-COVID-19 life.



Top: Members of the inpatient team: (L-R) Cynthia (RN, bed manager), Jeremy (housekeeping), Sharon (SW). Bottom: (L-R) Drs. Gretta Taylor, Dr. Shiloh Ricciotti, Patience (RN) and Dr. Kate Stymiest.

EDUCATION IN PSYCHIATRY

The Department of Psychiatry provides high caliber psychiatric education to residents, fellows, medical and graduate students, and mental health professionals.

This year necessitated a major shift to all virtual teaching and we would like to recognize that this has only been successful because of the flexibility and hard work of our residents, faculty and staff. Resources for faculty in anticipation of redeployment were developed and as a result, we now have educational modules for faculty.

Undergraduate Education

It was another successful academic year in undergraduate education, despite the challenges of COVID-19, and most learning occurred online. Our residents still received 69 nominations from the clerks for the Clerk's Choice Award, evidence of a continuing appreciation of their dedication to teaching. Dr. Kate Stymiest was chosen as the recipient for her outstanding contributions to their teaching.

In June, the department participated in the Annual Global Health Office's Link Program, preparing six students from the International Medical University of Malaysia for their entry into clerkship in August.

The medical student-led Psychiatry Interest Group is in its tenth year. The group continues to work towards its mandate of highlighting and facilitating discussion of mental health, as well as encouraging interest in the field of Psychiatry. Psychiatry for the Most Vulnerable was held in January. Psychiatrists joined the students to discuss what is unique to treating vulnerable populations.

SIIP (Summer Internship in Psychiatry), a resident-led initiative for Med 1 students to increase interest in and exposure to psychiatry, launched this year, with an inaugural group of nine students from both Halifax and Saint John campuses after being postponed from a 2020 launch by COVID-19. These students will participate



Residents and students participate in the inaugural Summer Internship in Psychiatry (SIIP).



The 2021 graduates are celebrated during the virtual graduation ceremony in June. Top row (L-R): Drs. Ali Manning, Abraham Nunes, Anthony Pianosi, Christelle Boudreau; Middle row (L-R): Drs. Christie McClelland, Chelcie Soroka, Greg MacMullin, Katie Radchuck; Bottom row (L-R): Drs. Laura Downing, Melissa Lahti, Tyson Rizzardo, Vhari James.

in a one week program including small group didactic sessions, elective experiences, resident panels, site tours and simulated patient experiences.

After the announcement of an additional 16 spots for the Class of 2024, we are preparing to welcome four additional clerks in August 2021 and 12 additional clerks in August of 2022.

As part of the effort to provide additional support to our clerks during the last year, our residents led the development of a mentorship program in which clerks participating in their psychiatry block are paired with a resident for mentorship. This program receives high marks in student evaluations and has expanded to residents and clerks in Saint John from the initial Nova Scotia-focused pilot.

Continued COVID-19 related restrictions resulted in visiting elective cancellations.

Postgraduate Education

Similarly to undergraduate education, COVID-19 created some unique challenges in postgraduate education. The department hosted the 2021 graduation exercises on June 23 through a virtual platform. Congratulations to the graduating Class of 2021: Drs. Christelle Boudreau, Laura Downing, Melissa Lahti, Greg MacMullin, Christine McClelland, Abraham Nunes, Anthony Pianosi and Chelcie Soroka.

Postgraduate education launched the first year of Competency Based Medical Education (CBME) in July and all PGY-1 residents

completed their Transition to Discipline stage at the end of August 2020.

In July 2020 Dr. Deborah Parker took over the associate program director role from Dr. Sherry James who had held the position since 2014.

Virtual CaRMS 2021 was successful with all eight positions filled in the residency program in round one of the match, three of which were filled by Dalhousie Medicine graduates.

In November 2020 the postgraduate education program received a follow-up accreditation visit. All previously identified areas for improvement were addressed satisfactorily.

Child and Adolescent Psychiatry Subspecialty Program

We had three residents complete their training in child and adolescent psychiatry. Dr. Vhari James returned from maternity leave in November 2020 to complete her training, and along with Drs. Ali Manning and Katie Radchuck, who started their PGY-6 subspecialty training on July 1, 2020, graduated in June 2021.

Both Drs. Lauren Chan and Emily Fraser will join the child and adolescent psychiatry subspecialty program as PGY-5 residents while completing their general psychiatry residency. They will officially enter the subspecialty program as PGY-6 trainees in 2022.

Drs. David Lovas and Sabina Abidi have been actively involved with the other CAP programs across Canada in the development of the core components of the competency based medical education (CBME) curriculum for the specialty, set to launch in July 2021.

Geriatric Psychiatry Subspecialty Program

In geriatric psychiatry, Dr. Meagan MacNeil stepped in as the interim geriatric subspecialty program director in the absence of program director Dr. Terry Chisholm, who was on sabbatical between August 2020 and May 2021.

Dr. Kathleen Singh, who graduated from the program in 2020, accepted the position of subspecialty selection committee chair as of July 2021.

Dr. Amy Gough has been successful in securing a position in the program beginning in July 2022. Funding has also been secured for a second resident position in 2022.

Competence by Design (CBD) workshops for program faculty were facilitated by Drs. Mark Bosma and Cheryl Murphy in September 2020 and May 2021 in preparation for the 2021 CBD program launch.

A faculty journal club was launched in November 2020 with the inaugural presentation given by Dr. Keri-Leigh Cassidy.

A longitudinal rural experience was introduced July 1, 2020. The residents will be supervised by Dr. Ian MacKay.

Curriculum development and scholarly work

Two grants received funding from Dalhousie's Centre for Learning

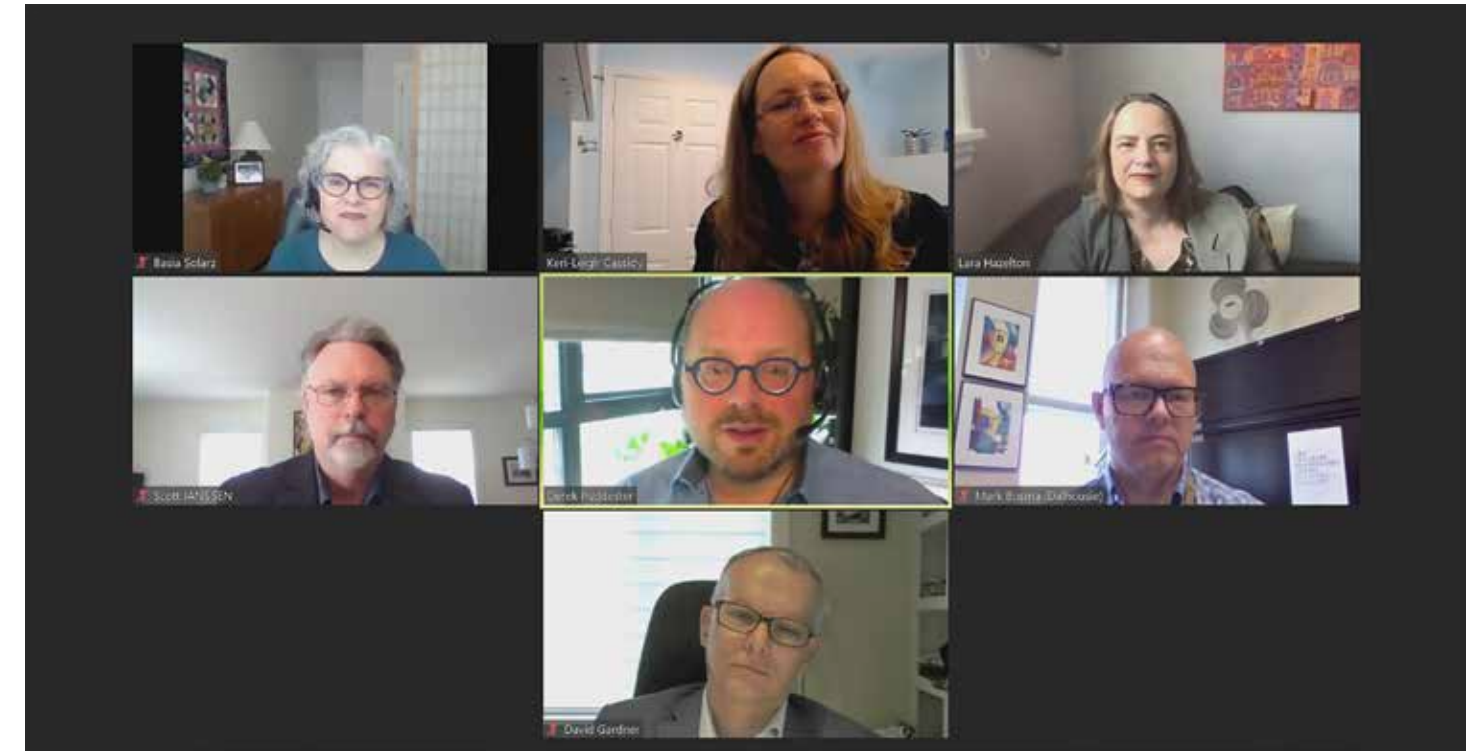
and Teaching were completed. One of the grants involved creating new resources for the clinical clerks: three animations and three eLearning modules to supplement their current psychopharmacology curriculum were incorporated into the clerkship curriculum in September 2020.

The department received grant funding for a medical education project from the department's Education Methods in Psychiatry fund: *Factors influencing evaluations of presenters at psychiatry grand rounds* (Lara Hazelton, Mandy Esliger, Kim Good) \$3425.

As part of a collaboration with McMaster's geriatric psychiatry program, our geriatric psychiatry eLearning modules are now available on McMaster's Medportal site for all geriatric psychiatry programs to access.

Four educational modules were developed for faculty who are redeployed to other areas of psychiatry which they may not be familiar with.

- Information on clozapine use
- Community Treatment Order Procedures
- Orientation for redeployment to acute care units
- Orientation for redeployment to Community Mental Health and Addictions



Panelists at W.O. McCormick Academic Day: (Top row L-R) Basia Solarz, Drs. Keri-Leigh Cassidy and Lara Hazelton; (Middle row L-R) Scott Janssen, Drs. Derek Puddester and Mark Bosma; (Bottom row) Dr. David Gardner.

Continuing Professional Development

We continued using Zoom to host rounds session this year, with very positive feedback and weekly attendance between 80 and 150. There were 37 rounds sessions during the 2020-2021 academic year.

On Nov. 27, 2020 the department held an online workshop for faculty entitled, *How to Overcome Procrastination and Accomplish What Matters*. The presenters were Dr. Victor Day and Dr. Lara Hazelton.

The department surveyed faculty and residents to learn more about their educational needs pertaining to Equity, Diversity & Inclusion (EDI). Findings are being used to inform EDI education planning in the department, including a series of EDI workshops.

The first EDI workshop, entitled *Anti-Oppression: What is it and how can we enact it?* was held on February 26. Presenters were Dr. Gaynor Watson-Creed and Dr. Ajay Parasram.

The 2021 W.O. McCormick Academic Day Conference, *Coaching and Behaviour Change*, proceeded online as planned, with 110 attendees.

Graduate Training in Psychiatry Research

Fall 2020 brought six new students to the graduate program from across Canada and from Romania. Included in our students' many successes this year were: three Nova Scotia Graduate

Scholarships; one Maritime SPOR Support Unit Student Award; one Faculty of Medicine Graduate Studentship; two Canadian Graduate Scholarship – Masters Awards; a Nova Scotia Black and First Nations Scholarship; and two Scotia Scholars Awards from Research Nova Scotia. While the class of 2022 was busy completing their core courses virtually due to pandemic restrictions, the class of 2021 was adapting their research to pandemic realities, wrapping up data collection, and preparing to defend their theses this summer. It was an exciting year as we celebrated six successful graduations in the fall after students defended their theses virtually. We received several applications for our new PhD program which is set to commence in the fall of 2021; two doctoral students have committed to joining us in September.

Medical Humanities

The Medical Humanities Program continued its annual national creative writing competition for undergraduate and postgraduate medical learners. This year's awardees were from Dalhousie University and the University of British Columbia. Humanities coordinator Dr. Abraham Rudnick, along with Dr. Lara Hazelton published a ten-year review of the competition. There was also an annual grand rounds and a seminar for the department's residents addressing transcultural psychiatry. A book club was started by PGY1 resident Alison Toron. The theme for this year was memoirs and auto-biographies related to mental health and resilience.



Dr. Mark Bosma presents virtually at W.O. Academic Day.

RESEARCH IN PSYCHIATRY

Spanning a wide variety of topics and involving basic and clinical research, clinical trials and studies of animal model systems, we collaborate with researchers locally within Dalhousie and its' affiliated teaching hospitals, and nationally and internationally.

Despite the challenges we faced with the COVID-19 pandemic, it has been another productive year of research in the Department of Psychiatry with many grants awarded and various research projects underway. The department is dedicated to supporting its researchers. This year, the department provided funding under both the The Department of Psychiatry Research Fund (DPRF) and a new Department of Psychiatry COVID-19 Research Fund Competition. Eight grants were awarded:

Department of Psychiatry COVID-19 Research Fund Competition

Normand Carrey – *Virtual care compared to in-person delivery of child and adolescent mental health services during the COVID-19 crisis; a mixed method analysis in real time*

Sherry Stewart – *No Exit: A longitudinal study of personality and social contagion effects on maladaptive affective, behavioral, and cognitive responses to COVID-19-related quarantine in romantic couples*

Rudolf Uher – *Rumination and vulnerability to depression in youth during a complex adversity*

April 2020 DPRF Competition

Tomas Hajek – *Neuroprotective effects of Li on retinal ganglion cells*

Sherry Stewart – *Neural mechanisms underlying relief and reward craving in concurrent PTSD - cannabis use disorder: A cue exposure plus fMRI pilot study*

Igor Yakovenko – *Screening, self-management and referral to treatment for cannabis in young adults*



Photo by Meruyert Gonullu from Pexels.

Collaborating virtually was the norm for most of our researchers during the 2020-2021 year.

October 2020 DPRF Competition

Sarah DeGrace (MSc student) – *Exploring associative memory mechanisms in cannabis users with trauma histories: relevance to understanding PTSD-CUD co-morbidity*

George Robertson – *CNS nanoparticle drug delivery*

External Grants for Department Investigators

Dr. Phil Tibbo – Canadian Centre for Substance Use and Addiction grant, \$98,940

Dr. Sandra Meier – Research NS New Health Investigator grant, \$100,000

Dr. Igor Yakovenko – Research NS New Health Investigator grant, \$99,657

Dr. Sandra Meier (co-investigators: Drs. Martin Alda, Alexa Bagnell, Tomas Hajek, Sherry Stewart, Rudolf Uher and Igor Yakovenko) – Nova Scotia COVID-19 Health Research Coalition grant, \$74,900

Dr. Rudolf Uher – Canadian Institute of Health Research (CIHR) COVID-19 grant, \$330,085

Dr. Rudolf Uher – CIHR grant, \$100,000

Dr. Sherry Stewart (co-investigator: Dr. Abraham Rudnick) – CIHR grant, \$115,000

Dr. Abraham Rudnick – Canadian Institute for Military and Veteran Health Research, \$10,000

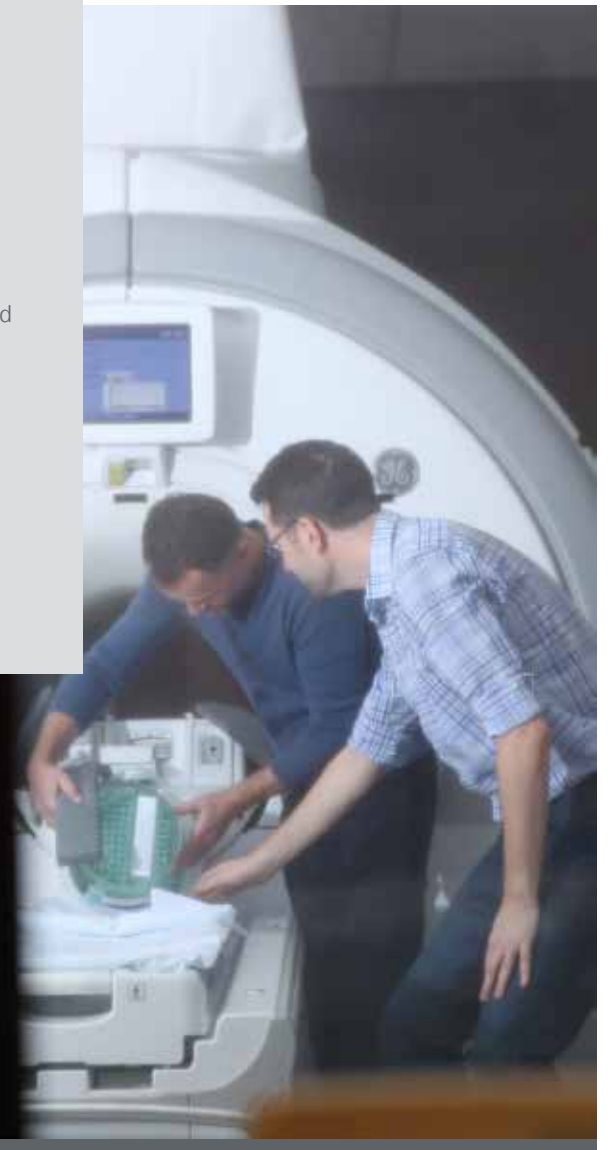
Dr. Sherry Stewart (co-investigator: Dr. Allan Abbass) – Social Sciences and Humanities Research Council contract, \$25,000

Dr. Martin Alda – CIHR grant, \$566,100

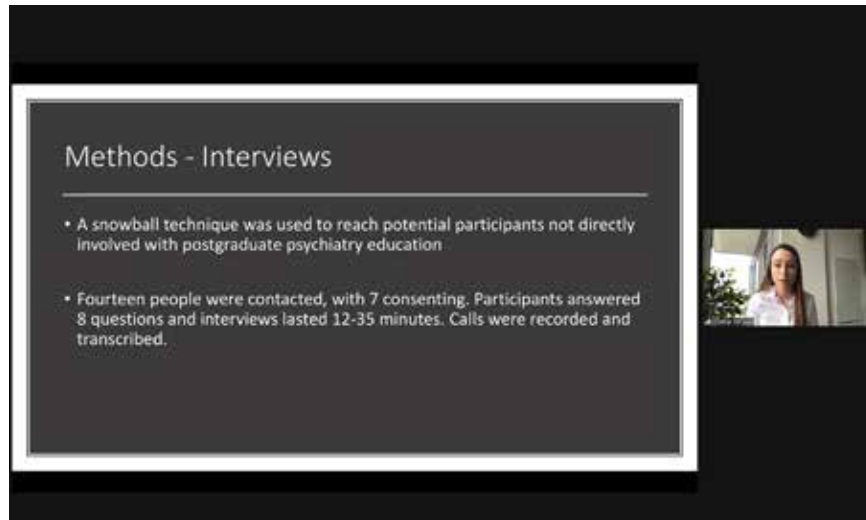
Drs. Jill Chorney and Normand Carrey – CIHR grant, \$194,211

Dr. Sherry Stewart – CIHR grant, \$200,000

Dr. Barbara Pavlova – Nova Scotia Health Research Fund, \$49,799



Dr. Tomas Hajek (left) works with a research assistant pre-pandemic.



Clockwise from top left: Dr. Chelcie Soroka presents virtually during Research Day; Drs. Igor Yakovenko, Simon Sherry, Sherry Stewart and Selene Etches participate in the 2020 Café Scientifique.

The Psychiatry Summer Studentship Program is designed to provide qualified undergraduate students with an opportunity to become involved in research in the Department of Psychiatry over the summer. This program offers students an opportunity to learn new research techniques as they acquire hands on experience in running experiments and analyzing data. In 2020, summer studentships were awarded to four learners:

Nytia Adepalli (Supervisor: Dr. Rudolf Uher) – *Molecular genetic information in the prediction of psychopathology*

Gizelle Francis (Supervisor: Dr. Sandra Meier) – *An app to record social interactions in youth*

Sam Good (Supervisor: Dr. Gail Eskes) – *Developing a measure of visuospatial attention*

Ruth Shelton (Supervisor: Dr. Barbara Pavlova) – *Severity of parental anxiety and behavioural inhibition in offspring*

The 30th Annual Research Day was held Oct. 30, 2021 over Zoom, gathering together 114 faculty, students, staff members and

researchers. Dr. Kathleen Brady, president of the International Society of Addiction Medicine Executive Committee and vice president for research at the Medical University of South Carolina, opened the event with the keynote talk, *The relationship between stress and substance use disorders: A complex conundrum*. This was followed by eight faculty, staff, and student oral presentations and 28 poster presentations in the afternoon.

The Café Scientifique, titled *The Impact of the COVID-19 pandemic on addictive behaviors and addictions services*, was also held over Zoom the evening of October 29. Dr. Sherry Stewart moderated the event and speakers included: Research Day keynote speaker Dr. Kathleen Brady; Dr. Simon Sherry, PhD, professor, Departments of Psychology & Neuroscience and Psychiatry, Dalhousie University, psychologist, CRUX Psychology; Dr. Igor Yakovenko, PhD, assistant professor, Departments of Psychology & Neuroscience and Psychiatry, Dalhousie University, psychologist, Jacqueline Milner-Clerk & Associates; and Dr. Selene Etches, MD, assistant professor, Department of Psychiatry, Dalhousie University, child & adolescent psychiatrist, medical director of the IWK Concurrent Disorders Program.



LIST OF CURRENT RESEARCH TOPICS

- | | | |
|--|---|--------------------------------|
| Aboriginal mental health | Executive functioning | Perfectionism |
| Addiction | First episode psychosis | Personality |
| ADHD | Gender | Personality disorder |
| Alcohol abuse | Gene expression | Pharmacogenetics |
| Alzheimer's Disease | Genetics | Pharmacological interventions |
| Animal model | Group resilience | Problem gambling |
| Anxiety disorders | Health psychology | Programming of gene expression |
| Attachment | Imaging | Psychoeducation |
| Autism | Implementation science | Psychopharmacology |
| Biomarkers | Implicit cognition | Psychosis |
| Child and adolescent mental health | Knowledge translation | Psychotherapy |
| Chronic pain | Medical education | PTSD |
| Cognitive behaviour therapy | Medical sociology | Rehabilitation |
| Cortical development | Medically unexplained physical symptoms | Schizophrenia |
| Cross cultural mental health | Memory | School mental health |
| Cross cultural psychology | Mental health education | Sleep |
| Dementia | Mindfulness | Smart health technology |
| Depression | Mood disorders | Social behaviour |
| Dopamine | Multiple sclerosis | Social media |
| Early interventions | Neurodegenerative diseases | Socio-economic factors |
| Eating disorders | Neurodevelopmental disorders | Somatic symptoms |
| Emotional processing | Neuroplasticity | Somatization |
| Emotions and health | Neuropsychology | Somatoform |
| Endocrine and behavioural stress responses | Neuroscience | Substance abuse |
| Epidemiology | Pain | Suicide |



Canada Research Chair in Addictions and Mental Health: Dr. Sherry Stewart

The work of the Canada Research Chair in Addictions and Mental Health, Dr. Sherry Stewart, focuses on understanding underlying mechanisms and effective interventions for concurrent mental health and addictive behaviors and disorders. Dr. Stewart is director of a \$2.5 million Social Science and Humanities Research Council (SSHRC) Partnership Grant. She is testing an adapted version of her personality-targeted substance misuse prevention/mental health promotion program, validated in adolescents, for use with undergraduates. *Univenture* is taking place at five Canadian universities, in concert with over 20 methodological and knowledge translation partners. This year, the team surveyed and interviewed high personality risk undergraduates and used the findings to adapt the intervention manuals. The team also received a grant to test the feasibility of online delivery, developed the online version, and pilot tested 90 undergraduates across five sites. Feasibility data are encouraging; participant feedback is

being used to modify the interventions prior to the trial launch in fall 2021.

Dr. Stewart is also site lead on a \$1.7 million CIHR Project Grant, the Canadian Underage Substance Prevention (CUSP) trial, to disseminate her personality-targeted substance use prevention program to Canadian high-schools, including nine in Nova Scotia. Although high schools were closed to research this year due to the pandemic, the CUSP team was able to train facilitators at several N.S. high schools in preparation for the trial launch in fall 2021.

Univenture and CUSP are the first national prevention trials to be funded through the Canadian Research Initiative in Substance Misuse (CRISM), a national research network to promote collaboration and innovative interventions for substance misuse. Dr. Stewart is the Atlantic Scientific Delegate of CRISM's Quebec-Atlantic node, and National Executive Committee member. CRISM Atlantic, with more than 125 members from all Atlantic Provinces, has been preparing for the CRISM renewal call where CIHR is expanding the network to five nodes, including a separate Atlantic node.

Dr. Stewart continues to co-lead the National Emerging Health Threats Working Group funded by Health Canada, focused on responding to the opioid crisis in youth and new users. Their cumulative research findings (scoping review, national service provider survey, youth focus groups and national summit) will be published in a Canadian Journal of Addiction special issue.

Due to the year-long pandemic-related lab closure, Dr. Stewart's work has pivoted to pandemic-related research, e.g., effects of self-isolating together and of mandatory homeschooling on romantic couples' mental health/addictive behaviors (DPRF-/SSHRC-funded), and of personality on pandemic-related adherence and distress in undergraduates (CIHR-funded).



Dr. Sherry Stewart

Canada Research Chair in Developmental Psychopathology and Youth Mental Health: Dr. Sandra Meier

The Canada Research Chair in Developmental Psychopathology and Youth Mental Health, Dr. Sandra Meier, and the PROSIT (Predicting Risk and Outcomes of Social Interactions) lab have been working on leveraging mobile technology to improve mental health care. Given the COVID-19 pandemic and public health measures in place, the development of novel online diagnostic and intervention tools seems now timelier than ever. A viewpoint that many Canadians seem to share, as more than 3,000 participants (40 per cent patients) engaged in the lab's research in the last year. Dr. Meier and her team were specifically interested in how the pandemic impacted mental health and what strategies people used to cope. Hereby, they made use of an innovative mobile sensing app (PROSIT) to capture objective markers of people's behaviour through this methodology. The key idea of this work was that mobile sensing data could increase patients' self-awareness of potential maladaptive behaviours and promote their self-management skills.

The PROSIT app has now been downloaded by more than 1,200 users, with more than 900 of them providing data for at least 14 days, rendering the study sample one of the largest in the world for this methodology. The data has already resulted in valuable insights. People who travelled more or spent more time on screen for example, were more anxious. In contrast, people who made a lot of phone calls seemed to be more resilient. Based on the results, a person-centered intervention app was developed reacting to mobile-sensing profiles and automatically sending users personalized health tips. Importantly, patients and their families are involved as active co-designers in the development of all apps of the lab (i.e., mobile sensing, intervention, and neurocognitive assessment apps) via online surveys or focus groups. The design of the PROSIT app received comfortability ratings of over 80 per cent from patients and families. The lab's research was further covered by multiple news outlets locally and in more than 20 countries internationally.

Dr. Meier and Dr. Patrick McGrath further co-led an initiative for developing online interventions for families of children with rare genetic syndromes. The initiative currently has partners in over eight countries and is involving more than 19 patient organizations.

In January 2021 Dr. Meier became cross-appointed with the Faculty of Computer Science. She supervised 15 students in the last year across disciplines, with two students graduating. In the past year Dr. Meier has authored nine publications and has an additional five in review. She also received additional grants, bringing the grant total to \$2.7 M.



Dr. Sandra Meier

Canada Research Chair in Early Intervention: Dr. Rudolf Uher

Dr. Rudolf Uher and his team have been working on identifying the early signs of risk for mental illness and testing preventive interventions in youth. Major types of mental illness, including schizophrenia, bipolar disorder and major depressive disorder continue to be the leading causes of disability and premature death. These disorders often start at a young age and are difficult to treat. The key idea behind Dr. Uher's research is that if we can identify signs of risk in children or adolescents, we can prevent the onset of mental illness through targeted early interventions.

The Families Overcoming Risks and Building Opportunities for Wellbeing (FORBOW) program involves over 300 Nova Scotia families. In the year 2020-2021, Dr. Uher and his team obtained federal funding to monitor the effect of the pandemic on the development of children, with a key focus on children of parents living with severe mental illness. Between May 2020 and April

2021, they completed interviews with over 1000 parents and children about their health and their experiences. The Skills for Wellness (SWELL) intervention and the Indications for Antidepressants and Cognitive-Behavioural Therapy for Depression studies were recognised as life-altering research studies and were allowed to continue through the pandemic. Thanks to this, over 100 young people have now received early interventions aimed to increase their chances of healthy development.

It has been a productive year, with Dr. Uher and his team publishing 20 original research articles, presenting at three international conferences and being awarded two competitive federal grants. Discoveries of this year include an association of older-appearing brains with mental illness during adolescence, a genetic link between attention deficit/hyperactivity disorder and multiple adverse experiences, and a personalized indication for an add-on treatment for depression. The team have also developed a new early risk identification instrument that has been translated to 10 languages. To make the new knowledge available to the broader public, each FORBOW findings are described in accessible lay language at www.forbow.org/results.

The FORBOW program produces highly-qualified professionals of the highest caliber. Three graduate students have successfully defended their master's and PhD theses in 2020-2021. Three current graduate students have also obtained competitive funding that highlights the excellence of their work.

Dr. Uher leads the data science platform of the Canadian Biomarker Integration Network for Depression (CAN-BIND) and serves as the Canadian Commissioner on Depression for the Lancet and the World Psychiatric Association. For the third consecutive year, Dr. Uher has been listed as a highly-cited researcher by Clarivate and the Web of Science.



Dr. Rudolf Uher

Dr. Paul Janssen Chair in Psychotic Disorders: Dr. Philip Tibbo

Dr. Philip Tibbo, as the Dr. Paul Janssen Chair in Psychotic Disorders, continues in his mandate to lead, foster, and mentor research in psychosis and schizophrenia. The disruption to clinical research due to the COVID-19 pandemic during the summer of 2020 was significant, especially to longitudinal studies. The research team however, is now looking forward to the upcoming year with optimism.

Over the last year, research continued into the understating of the effects of cannabis on psychosis development and outcomes. Ongoing is a CIHR funded neuroimaging study, aiming to characterize the effects of various levels of cannabis use on brain white matter (WM) structure and connectivity, examining groups of young adults with and without early phase psychosis (EPP). Gender specific effects are being examined by a Department of Psychiatry Research Fund (DPRF) funded neuroimaging grant, and with Dr. Derek Fisher, a Canadian Institute of Health Research (CIHR) catalyst grant is exploring the effects of cannabis on event-related potentials (ERPs) by gender. The chair is co-leading a CIHR Team catalyst grant that is a multimodal, translational research program with colleagues across the country to examine the genetic, pharmacologic and psychosocial factors linked to cannabis-induced psychosis and the neurodevelopmental mechanisms underlying risk. With funding from the Canadian Center on Substance Use and Addictions (CCSA) in 2020, this year the chair will be leading a unique collaborative project with members of the Department of Emergency Medicine (NSH and IWK) as well as NS Emergency Health Services, to study cannabis-related presentations to the emergency department.

Collaborating with other PIs will see research focused on, vaping; examining personality, vulnerability and motives for substance use in EPP; and EPP patient's perspectives on the use of e-interventions for cannabis use. Other non-cannabis focused early phase psychosis studies that the chair was involved with

over the last year and will continue with include: ERP markers in high risk populations, neuroimaging markers of clozapine eligibility in EPP, and problematic gambling in EPP.

Supervision of master's in psychiatry research and PhD students, and psychiatry residents for research projects and electives over the last year has allowed for the development of studies examining psychotherapy for those individuals with adverse events, substance use and psychosis, investigation of differences in inpatient admission due to COVID-19, and outcomes of SPMI (serious and persistent mental illness) patients following curative intent surgery for lung and esophageal cancer.

The chair continues as president of the Canadian Consortium for Early Intervention in Psychosis (CCEIP), and provincially, the chair has been active with the development and roll-out of a provincial model of EPP care, evaluation and research in Nova Scotia.



Dr. Philip Tibbo

Killam Chair in Mood Disorders: Dr. Martin Alda

Established in 2007, the Killam Chair in Mood Disorders was established for the purpose of integrating research into the basic mechanisms of mood disorders and their treatment with excellent clinical care. Held by Dr. Martin Alda, the chair's focus is on primary mood disorders. Bipolar disorder and depression are highly heritable, affect young people, lead to high morbidity and mortality, and can be more or less successfully treated. Three lines of enquiry - mapping genes for these conditions, examining how the genetic risk translates into behavioural and clinical features of the illness, and linking the risk factors with the treatment response, brain structure and function - are at the core of his research program. To this end, the research uses clinical, molecular-genetic, biochemical, brain-imaging, and neuropsychological methods in studies of patients and their family members.

Dr. Alda and his research team at the mood disorders program have been active in several areas during the 2020 – 2021 year. They continue their clinical and genetic studies of bipolar disorder and



Dr. Martin Alda

pharmacogenetics of lithium response. In particular, they were able to confirm a previously proposed hypothesis that lithium responders are a genetically distinct subtype of bipolar disorder.

Continuing work with several international consortia, Dr. Alda and colleagues also reported a number of findings from molecular genetic studies. As part of the Psychiatric Genomics Consortium, they contributed to the largest genome-wide association study of bipolar disorder accepted for publication in Nature Genetics.

At present, the program has one master's in psychiatry research student applying to transfer to the PhD program. The topic of her work is the degree of heritability of clinical features of bipolar disorder.

Most recently, Dr. Alda has been a co-investigator on a CIHR grant awarded to Dr. Abigail Ortiz at the University of Toronto. Dr. Ortiz is a former member of our department and did her fellowship training with Dr. Alda. The five-year grant will map the clinical course of bipolar disorder and attempt to predict depressive and manic relapses of the illness.

In October 2020 Dr. Alda was a recipient of one of the most prestigious prizes for mood disorders research, the Colvin Prize awarded by the Brain and Behavior Research Foundation in New York. He received the award for his work on personalized treatment of bipolar disorder and shared it with Dr. Gustavo Turecki at McGill University.



During the COVID-19 pandemic many doors were closed to our researchers. They worked tirelessly to continue their research in any manner possible.



EXCELLENCE IN PATIENT CARE

Our faculty members hold key positions in clinical programs, provide consultation and assistance to community-based mental health programs, and work to ensure that primary care physicians are equipped with the knowledge and skills to identify mental illness.



Members of the seniors mental health team clockwise from back left: Dr. Mark Bosma, Sarah Krieger-Frost (RN), Caitlin Manley (RN), Dr. Kathleen Singh, Dr. Meagan MacNeil, Dr. Keri-Leigh Cassidy, and Erica McInnis (SW).



Adult General and Specialty Mental Health and Addictions Services

The Department of Psychiatry, in collaboration with Nova Scotia Health, the Department of Health and Wellness, and Doctors Nova Scotia, provides publicly funded clinical psychiatric services across the adult age spectrum encompassing the breadth of psychiatric illness in both general mental health clinic settings and in specialty areas.

Under the auspices of Nova Scotia Health (NSH), the Department of Psychiatry provides clinical services to the central zone of NSH and in some specialty areas, provides services or consultative services across the province of Nova Scotia and throughout the Maritimes.

The department embraces the co-leadership model espoused by NSH and has an outstanding cadre of academic staff engaged in co-leadership roles overseeing key components of the organization, coordination and delivery of clinical services.

Clinical services have, to use a now well-worn phrase, had an “unprecedented” year. Clinical volumes in community mental health decreased in the first wave of the COVID-19 pandemic, but rebounded in the remainder of the year, as the stress of prolonged isolation led to an increased demand for services. Staff have nimbly pivoted to a combination of in-person and remote service delivery to ensure that those that couldn’t come onsite and those that needed to be seen in person could have their specific needs met. Thanks to deputy clinical director of community mental health and addictions, Dr. Sonia Chehil, for her pivotal role in the transition.

Our clinic site in Dartmouth has just recently moved to a new location, also in Dartmouth, and will incorporate both the general mental health and addiction and Recovery and Integration program (R&I). Connections Halifax, our Halifax based R&I



Top: Jeff Toth, registered nurse at the Operational Stress Injury Clinic collaborates on screen and Dr. Shannon Bedford (photo credit: Patrick Daigle); Bottom: (L-R) Drs. Kate Stymiest, Shiloh Ricciotti, and Sharon Fernandez (SW) (photo credit: Dr. Sanjana Sridharan.)

program has recently relocated to Spring Garden Road.

In the broader societal context several staff made themselves available to provide general education and support on managing the stressful events of 2020, including but not limited to the pandemic and the Portapique tragedy. Particular thanks to Drs. Allan Abbass and Jackie Kinley for their contributions.

Inpatient services have had to deal with all these stressors, as well as managing the restrictions in liberties for patients, and the agitation that can cause, necessitated by protocols established to keep patients and staff safe. After an initial lull at the start of the pandemic, there has been an unrelenting demand on inpatient services. Inpatient acute care staff, as would be expected of our Dalhousie staff, have provided exemplary service under difficult conditions and continue to do so as we move into the new fiscal year. Our thanks go out to Dr. Sanjana Sridharan, deputy clinical director of acute care, and her team in providing stability in such an unstable time.

In August we will welcome our new department head, Dr. Vincent Agyapong. As we look forward to his arrival we must acknowledge Dr. Jason Morrison’s leadership over this last year; his support of staff, guidance and leadership have been instrumental in advancing the clinical care environment during a very challenging year.

Child and Adolescent Psychiatry Services

The Division of Child and Adolescent (C&A) Psychiatry, together with the Mental Health and Addictions program at the IWK, provide quality care to children, youth, and families of the Maritimes. Programs include crisis, emergency, inpatient, outpatient and community mental health support.

2020-2021 has been quite the year, with frequent changes and challenges in clinical and academic areas secondary to the COVID-19 pandemic. Within a month of the pandemic state of emergency in Nova Scotia, we experienced a terrible tragedy with the mass casualty shooting in northern zone of our province. Our faculty, residents and administrative team rose to these challenges to support young people in our province. The dedication and compassion in supporting our patients and caregivers, colleagues and community partners through these times has been phenomenal.

In clinical services, moving to virtual clinical outpatient services, quite literally overnight, the innovation in developing care pathways to deliver virtual care safely and effectively, and expansion of this virtual platform to expand access and capacity building in our province are excellent examples of the amazing work that has taken place.

Our Nova Scotia Child and Adolescent Psychiatry Network has met regularly during the pandemic, sharing resources and keeping in close collaboration around clinical services in the province. In

November 2020, the Atlantic Child and Adolescent Psychiatry Conference led by Dr. Sabina Abidi was held virtually with 31 child and adolescent psychiatrists from across the Maritime Provinces in attendance. We also led the *Road to Resilience Webinar* series in partnership with the Department of Education supporting Nova Scotia youth, parents and educators with return to school in September 2020. The annual Trans Health Symposium was also held virtually in fall 2020 facilitated by Dr. Suzanne Zinck. More than 100 clinicians from the Maritime Provinces attended and received training in transgender healthcare for youth.

Our rapid and efficient adaptation to virtual care was assisted by many faculty and administrative staff, and we are grateful for those faculty who presented at academic rounds and IWK webinars to support capacity building in virtual care practice. Dr. David Lovas supported IWK physician and clinician wellness through mindfulness sessions in the first three months of the pandemic. We launched two provincial innovative capacity building initiatives, and conducted over 30 international, national, and regional presentations and publications. The CRC tier 2 chair, Dr. Sandra Meier, has also received international recognition for novel work in mobile sensing and mental health for youth.

In March 2020 after a state of emergency was declared due to the pandemic, all mental health and addictions outpatient and intensive services stopped in-person care and transitioned rapidly to virtual service delivery with great success. In fact, in the first three months of the pandemic, our specialty clinics saw more appointments than in the previous year during the same time period. Virtual services are now integrated as a patient care option at IWK. We continue to maintain our 30-day wait time target for new referrals to our psychiatry-led specialty clinics and 60-day target for psychiatry referrals to our community mental health and addictions clinics.

Acute inpatient and emergency services have remained in-person throughout the pandemic and adapted rapidly to changing protocols and processes. Since December 2020, there has been an approximately 20 per cent increase in demand for ambulatory and emergency services compared to the same time period in the previous four years. These services have been strong and steady through this year and we have been very proud of how they have risen to the challenge of clinical demands, uncertainty and change.

Our adolescent and children's intensive services (AIS & CIS) initially moved to virtual care in March 2020, and then returned to in-person in summer 2020. The CIS service had a prolonged construction project on their secure rooms, and AIS assisted to help provide space for CIS patients and staff in order to continue to provide this service to our provincial children and families.

In conjunction with the IWK Mental Health and Addictions program we were successful in acquiring IWK Foundation support for families with virtual care challenges through device loan and internet support. We also received government funding to establish a trust to help foster strengths and protective factors for concurrent disorder patients who are at higher risk during this time.

In ambulatory services, there have been changes made to the IWK mental health and addictions ambulatory registration system to allow collection of improved data on the type of patient visits and service utilization which is being incorporated into the ongoing psychiatry value stream work. In November 2020, IWK psychiatry launched an Experience of Service Survey for patients and families after their first psychiatry appointment. Results were very positive in terms of satisfaction with service by both patient and families. We also completed work on our mandate for psychiatry services and continued to focus on continuous improvement work in psychiatric services including a focus on faculty morale by launching engagement surveys for psychiatry faculty in spring 2020, with plans to repeat in spring 2021.

Innovation in capacity building has been a significant focus over this past year within IWK mental health and addictions. Led by Dr. Jill Chorney, IWK Mental Health and Addictions is developing a Knowledge Management System (KMS) application. The vision is to ensure that all youth and families in Nova Scotia receive the same quality of mental health and addictions care. The KMS aims to gather the MH&A expertise and resources we have readily available and create a single point of access for users to find the best and most up-to-date information. The KMS application will include information such as treatment resources, training documents, relevant research, contact information for those with relevant expertise, and a calendar with key events and important dates.

Through the support of the Sobey Foundation and Sobey Family, and in conjunction with the Canadian Children's Hospital

Foundation, the Learning Link was also launched in the last year. This IWK innovation project in mental health and addictions is one of 13 projects funded by this collaboration. The Learning Link will be a virtual and physical space for Integrating excellent clinical care and leading-edge research and innovation. It will also support capacity development in clinicians, researchers, youth, and caregivers from across the Maritimes.

This year has really demonstrated the strong leadership in our faculty, our excellent teamwork and support of each other, and our commitment to delivering the best care in the face of adversity.



Dr. Celia Robichaud works with a patient pre-pandemic.

APPLAUDING OUR PEOPLE



During a tumultuous year, when many things stood still, our department members still managed to excel. We are so proud of every single person who made 2020-2021 a success.

PROMOTIONS

Effective July 1, 2020

Dr. Suzanne Zinck – Associate Professor

AWARDS

Association of Faculties of Medicine of Canada Award for Outstanding Contributions to Faculty Development
Dr. Lara Hazelton

Association of Psychologists of Nova Scotia Dr. Charles J.A. Hayes Lifetime Contribution Award
Dr. David Pilon

Brain & Behaviour Foundation Colvin Prize for Outstanding Achievement in Bipolar Mood Disorders Research
Dr. Martin Alda

Canadian Academy of Child and Adolescent's (CACAP) Paul Dr. Steinhauer Advocacy Award
Dr. Selene Etches

Canadian Academy of Geriatric Psychiatry Resident Award
Dr. Marissa LeBlanc

Canadian Academy of Geriatric Psychiatry Geriatric Psychiatry Subspecialty Resident Award
Dr. Crystal Zhou

Canadian Association of Medical Education Certificate of Merit
Dr. Lara Hazelton

Canadian Psychiatric Association Paul Patterson Innovation in Education Leadership Award
Dr. Cheryl Murphy

Clarivate and the Web of Science Highly Cited Researcher
Dr. Rudolf Uher

College of Physicians and Surgeons of Nova Scotia Gold Headed Cane Award
Dr. Kara MacNeil

COPE Resident Best Paper Award
Dr. Chelcie Soroka

Dalhousie University Award for Excellence in Diversity
Dr. Amy Bombay

Department of Psychiatry Educator of the Year Award
Dr. Aileen Brunet

Department of Psychiatry Larry Buffet Outstanding Teacher Award
Dr. Tanya Tulipan

Department of Psychiatry Outstanding Clinician Award
Dr. Lourdes Soto-Moreno

Digital Health Canada Top 10 Women Leaders in Digital Health
Dr. Patricia Lingley-Pottie

Halifax Chamber of Commerce Halifax Business Awards Not-for-profit Business of the Year Award Finalist
Solutions for Kids in Pain (SKIP) (Dr. Christine Chambers, Scientific Director of SKIP)

Maritime Resident Doctors (MARDOC) Kitt Turney Award for Resident Wellness"
Dr. Ali Manning

Merck Patients First Award
Drs. Mutiat Sulyman and Alaba Williams as part of the Dual Diagnosis Program and the Community Outreach Assessment Support and Treatment (COAST) team"

Society of Pediatric Psychology Dennis Drotar Distinguished Research Award in Pediatric Psychology
Dr. Christine Chambers

RESIDENT RECOGNITION AWARDS

Herb Orlik Child & Adolescent Psychiatry Award (PGY3)
Dr. Kate Stymiest

Geriatric Psychiatry Resident Award (PGY3)
Dr. Mackenzie Armstrong

Clerks' Choice Award
Dr. Kate Stymiest

Alexander H. Leighton Resident of the Year Award
Dr. Marissa LeBlanc

Health Network, Saint John Zone PGY1 Resident of the Year Award
Dr. LeAnne Revell

Charles J. David Memorial Prize (PGY-2)
Dr. Michelle MacDonald

W.O. McCormick Award
Dr. Katie Lines
Dr. Jill Cottreau

Robert and Stella Weil Fund in Psychiatry Prize
Dr. Anastasia McCarvill

Special Recognition: Chief
Dr. Marissa Leblanc
Dr. Katie Lines

Teacher of the Year Award
Dr. Deborah Parker

Above & Beyond Award
Mathias Gay

PGY-5 Excellence Award
Dr. Meagan MacNeil

Mentorship Award
Dr. Keri-Leigh Cassidy

Resident Professionalism Award
Dr. LeAnne Revell
Dr. Tyson Rizzardo

RESEARCH DAY AWARDS

Best presentation by a undergraduate student
(tie) Katherine Simon & Emilie Pelletier (joint presentation) and Fiona King

Best presentation by a graduate student
Kitti Bessenyei

Best presentation by psychiatry staff
Alex Pizzo

Best presentation by a resident
Dr. Abraham Nunes

Best presentation by a Postdoc
Sean McWhinney

LEADERSHIP

NSHA CENTRAL ZONE LEADERSHIP

Dr. Jason Morrison
Interim Head/Chief

Dr. Scott Theriault
Deputy Head/Clinical Director

Dr. Sanjana Sridharan
Deputy Clinical Director Acute Care

Dr. Jason Morrison
Deputy Clinical Director Recovery and Integration

Dr. Sonia Chehil
Deputy Clinical Director Community Mental Health

NSHA CLINICAL ACADEMIC LEADERS

Dr. Andrew Harris
Consultation/Liaison

Dr. Mutiat Sulyman
Dual Diagnosis Program

Dr. Keri-Leigh Cassidy
Geriatric Psychiatry

Dr. Martin Alda
Mood Disorders

Dr. Phil Tibbo
Early Psychosis

Dr. Allan Abbass
Centre For Emotions and Health

Dr. Risk Kronfli
East Coast Forensic Hospital Interim Clinical Director

Vacant
Addiction Prevention and Treatment Services

Dr. Joe Sadek
Mayflower Unit

Dr. Michael Flynn
ECT

IWK LEADERSHIP

Dr. Alexa Bagnell
Head/Chief

Dr. Sabina Abidi
Associate Chief IWK Head, Division of Outpatient Services

Dr. Jonathan Brake
IWK Head, Division of Inpatient Services

IWK MEDICAL DIRECTORS

Vacant
Medical Director of Inpatient Services

Dr. Ahmed Alwazeer
Medical Director of Adolescent Intensive Services (AIS)

Dr. Aidan Stokes
Medical Director of Children's Intensive Services (CIS)

IWK PHYSICIAN CO-LEADERS

Dr. Jennifer Cumming
Dartmouth Community Mental Health Clinic

Dr. Sabina Abidi
Halifax Community Mental Health Clinic

Dr. Lourdes Soto-Moreno
Sackville Community Mental Health Clinic

Dr. David Lovas
Emergency Mental Health and Addictions Service (EMHAS)

EDUCATION LEADERSHIP

Dr. Margaret Rajda
Director, Education

Dr. Mark Bosma
Director, Postgraduate Education

Dr. Deborah Parker
Associate Director, Postgraduate Education

Dr. David Lovas
Director, Child and Adolescent Subspecialty Training Program

Dr. Meagan MacNeil
Interim Director, Geriatric Subspecialty Training Program

Dr. Cheryl Murphy
Director, Undergraduate Education

Dr. Lara Hazelton
Director, Continuing Professional Development

Dr. Lukas Propper
Director, Child and Adolescent Psychiatry Education

Dr. Sherry Stewart
Graduate Program Coordinator

Dr. Abraham Rudnick
Medical Humanities Coordinator

RESEARCH LEADERSHIP

Dr. Ben Rusak
Director, Research

ADMINISTRATION

ADMINISTRATION

Janet Bardon
Physician Resource Manager

Jennifer Brown
Postgraduate Education Coordinator

Vacant
Executive Assistant to Department Head

Mandy Eslinger
Evaluation & Curriculum Specialist

Linda Ford
HR Administrative Assistant

Kelly Hancock
Undergraduate Coordinator

Tracy Fraser MacIsaac
Education Coordinator

Sandra Millar
Finance Assistant

Kate Rogers
Communications Coordinator

Carolyn Sisley
Director of Finance and Administration

Hillary Yuill
Research Coordinator

DIVISION OF CHILD AND ADOLESCENT PSYCHIATRY

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Education and Research Coordinator

Krystal Bergman
Administrative Assistant

Jennifer Cunningham
Administrative Assistant

Melissa Davis
Administrative Assistant

Debi Follett
Administrative Assistant

Michelle LeBlanc
Administrative Manager

Joan Sweet
Receptionist

Robin Stinson
Administrative Assistant

OUR PSYCHIATRIC SERVICES

Adult Psychiatry Services

Addiction Prevention and Treatment Services

Adult Neurodevelopmental Psychiatric Unit (Mental Illness & Intellectual Disabilities)

Centre For Emotions and Health

Community Mental Health

Consultation/Liaison

Early Psychosis

Eating Disorders

Emergency

Forensic Psychiatry Services

Geriatric Psychiatry

Inpatient Psychiatry

Mental Health Day Treatment

Mobile Crisis

Mood Disorders

Recovery and Integration Services

Reproductive Mental Health

Shared Care

Short Stay Unit

Sleep Disorders

Child & Adolescent Psychiatry Services

IWK Acute Care Psychiatric Inpatient Unit (Garron Centre)

IWK Consultation/Liaison Service

IWK Emergency Mental Health and Addictions Service (EMHAS)

Children's Intensive Services (CIS)

Adolescent Intensive Services (AIS)

Youth Forensic Services (Includes Nova Scotia Youth Facility Secure Care Unit)

Community Mental Health and Addictions Clinics

Specific Care Outpatient Clinics:

Eating Disorders

Bipolar Disorders

Concurrent Disorders

Obsessive Compulsive Disorder

Tourette's/Movement Disorders

Early Psychosis

Autism Spectrum Disorders

OUR PROVINCIAL PROGRAMS

Provincial Programs

Adult Neurodevelopmental Stabilization Unit

Child and Adolescent Psychiatry Services

East Coast Forensic Hospital

Eating Disorders Program

Mental Health Day Treatment Program

Mood Disorders Program

Nova Scotia Provincial Early Psychosis Intervention Service (EPINS)

Reproductive Mental Health Program

Seniors Mental Health Program




Photo by Alex Tapai from Pixels

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