

# HEADLINES

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## TEACHING TRANS HEALTH

IWK HOSTS SECOND ANNUAL  
TRANS\*HEALTH SYMPOSIUM



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# HEAD LINES



# MESSAGE FROM THE HEAD



As we round into the final part of the academic year, the department remains busy and active. The strategic planning exercise, which began last fall, kicked into high gear. Stephanie Heath has now held planning exercises with the executive committee and has held five planning sessions with our members. Five more sessions are planned for the coming weeks, which will be followed by at least one more executive committee session. We expect to be able to launch the completed strategic plan, designed to guide our operations over the next five years, early in the fall. My thanks for the energy and thoughtfulness of the contributions in these meetings.

As we go to press our PGY-5 residents are burning the candle at both ends in preparation to challenge their final examinations at the Royal College. We wish them every success and look forward to the graduation party scheduled for June 3.

As you likely know, we had a measles alert on April 17. A patient who later developed the disease was seen in the Halifax Infirmary ER. This led to a check on the immunization status of anyone who was present in the ER while the patient was there. It affected several of our staff and learners who had to produce proof of immune status in order to continue to work. This is a timely reminder to all of us to check for records of immunization, and perhaps to see your family physician to update your status.

The critical shortage of psychiatrists



*Dr. Michael Teehan*

in the Eastern and Northern Zones continues, in spite of intensive efforts to recruit. Recently the situation in the inpatient service in Truro worsened. Discussions are underway to offer short term relief from this zone, with volunteers spending short periods there to relieve the situation. This is a short term, and non- sustainable option, while recruitment and retention efforts continue. My thanks to the staff who have volunteered to participate in this exercise.

You will note that Rachel Boehm was the successful candidate for the Chris Power award, featured in this edition. Congratulations to Rachel on this well- deserved honour.

Finally, an update on AFP negotiations. My initial optimism about this process is rapidly draining away. Although the tone of the negotiations is civil, there has been mounting frustration. Numerous dates for talks have been cancelled which has been especially difficult for physician members of the negotiation team. The parallel process of Master Agreement and AFP negotiations has at times seemed helpful, but at others seemed to hamper progress in the AFP talks. We are acutely conscious of the fact that the present contract expired on April 1, and have made it a principle of the negotiations that a new contract must be backdated to then. I will update as things unfold.

## ON THE COVER



As trans-health education becomes an ever more important issue, physicians in the Department of Psychiatry are working hard to provide training in gender identity assessment and support to healthcare workers. On March 28 and 29, the second annual Trans\* Health Symposium took place at the Victoria General Hospital, hosted by the IWK. The symposium, *Integrated care for gender dysphoric, gender non-binary, & transgender children into adulthood*, saw more than 70 mental health clinicians and medical providers, including social workers, psychologists, registered counselling therapists, endocrinologists, family physicians, pediatricians, nurse practitioners and psychiatry residents and fellows, in attendance. Building on the success of the inaugural symposium in 2018, the goal was to increase access to competent care for gender creative, gender dysphoric and transgender youth and their families throughout the Maritimes.

The idea for the symposium was born out of collaborative team meetings and input from mental health and addictions community managers and leadership. Specifically, a manager for the Nova Scotia Health Authority (NSHA) Child and Youth Community Mental Health contacted IWK Mental Health and Addictions leadership requesting education and support in training their clinicians in gender identity assessment and support. The managers agreed to send staff from their clinics to receive the training. **Dr. Suzanne Zinck** chaired the planning



Symposium chair, Dr. Suzanne Zinck.

committee and worked to develop the program with clinical social workers Robert Bartlett, Roben Kennedy, and Nancy Wright, as well as general adult psychiatrist **Dr. Shannon MacDonald** and pediatric endocrinologist, Dr. Arati Mokashi. The committee also had the support of administrative staff Megan Bellefontaine and Debi Follett, to develop the program.

“The aim is to provide an interactive, evidence-based didactic course to prepare clinicians to recognize and support youth with gender variance and gender dysphoria into adulthood,” says Dr. Zinck. “The symposium is intended to serve as a foundation course for healthcare providers (especially those in child and youth

mental health and primary care) in understanding gender identity development including the typical presentations and course of gender variant behaviour; gender creative expression, and gender and body dysphoria.” The symposium training includes sections on mental health, endocrinological (hormone) treatment and surgical readiness assessments. Participants are then able to join the IWK and prideHealth monthly telephone peer supervision networks. The training is also accredited by the World Professional Association for Transgender Health (WPATH) Global Education Initiative, so that those providers who seek to write the WPATH certification exam are given

credits from the symposium.

The symposium is designed to ensure it is multi-disciplinary and inclusive of the trans health community and community health resource providers such as prideHealth, a joint IWK-NSHA initiative, and the Youth Project and PFLAG. Part of the two-day training included a panel of gender diverse and trans youth. They also presented their experiences through a question and answer session with Robert Bartlett. Speakers were chosen who are passionate about their areas of practice and effective teachers. "The youth panel is always a highlight," says Dr. Zinck. "They are courageous and keep us focused on what matters most. From a capacity-building perspective I am grateful to clinicians who made themselves vulnerable enough to discuss their concerns and hopes for this work and to actively state the gaps in expertise in their geographic areas. This led to a rich discussion in the network and peer supervision discussion."

Positive changes as a result of the symposium are already evident. Since the 2018 symposium there are now trained mental health providers giving care to gender diverse and trans youth and their families in every public child and youth Community Mental Health Clinic in the province, as well as a stronger network of peers for supervision and referral. Care capacity has increased as a result, with dozens of patients who would have been seen at the IWK now receiving assessment and support in their own communities. "The aim was not to reduce the waitlist here at the IWK, but to assist clinicians who are already trained and practicing with youth and families to offer care in this specific

area, within their scopes of practice," says Dr. Zinck. "The other aim is to increase a provincial and eventually, even a Maritime-wide network of care providers."

Dr. Zinck recognizes the progress that has been made, but knows there is still a long way to go. "Trans health is no longer a specific care or specialist scope of practice. The prevalence may be as high 0.5-1.0 per cent, most of whom will seek medical and surgical services." This is being acknowledged throughout the medical literature. In the last year alone, the journals *Pediatrics* (American Academy of Pediatrics); the *Lancet*; the *CMAJ*; the *BMJ*; *American Family Physician*, and the *Journal of Child Psychology and Psychiatry*, have featured core articles on trans gender health care. "Gender dysphoria is one of the few areas of mental health care where providers need to understand the medical and surgical aspects well enough to assess capacity to consent to a referral, and to collaborate in an effective and timely way with the relevant specialist physicians."

A less measurable, but very important effect this education can have is to help society, including media and decision makers in government, to understand that non-binary and transgender identities are just another way that gender identity is experienced. "It is a common belief, not supported by evidence, that the experience itself of gender identity development is different for gender dysphoric and trans gender people than the process for those who do not experience gender dysphoria," says Dr. Zinck. "While the cause of gender variance in identity relative to sex assigned at birth is not yet known

(though is likely neuro-endocrine) there is ample evidence of how these identities may be expressed and their course. The misconceptions that gender identity variance is either invalid or pathological in itself are at the root of minority stress and discrimination. These stresses are determinants of health, and can also impact access to timely and effective health care." A simple message on this is given clearly in an educational video about pronoun use that is presented at the symposium: "Genitals don't equal gender. Empathically understanding the experience of gender dysphoria is an essential skill for clinicians."

The desire is to host a Trans\*Health Symposium annually. As the network grows, providers who were trained the previous year will be seeking more information and training on advanced topics. Adult psychiatrist, Dr. Shannon MacDonald, sees the great value in the event and looks forward to having it continue. "This symposium," she says, "and all of our longer term connectivity, communication, and supports, is a very nice example of adult and child and adolescent psychiatry working together closely, and I think it is doing a lot of good in our consistency and our attempts for continuity for patients in this population." Watch for the third annual symposium in spring 2020.



# RESEARCH REPORT



## MEET A RESEARCHER: DR. AARON KESHEN

This issue profiles Dalhousie researcher **Dr. Aaron Keshen**, psychiatrist and assistant professor in the Department of Psychiatry. *Meet a Researcher* is a recurring article in the research section of *Headlines*. If you are interested in being profiled in an upcoming publication, please contact **Hillary Yuill** at [Hillary.Yuill@nshealth.ca](mailto:Hillary.Yuill@nshealth.ca).

### ***My current research interests:***

My research primarily focuses on investigating new treatments for eating disorders. I have also been interested in how factors, such as self-efficacy, motivation, and readiness for behavior change, impact on eating disorder treatment outcomes.

### ***Research projects I'm currently participating in:***

I am the primary investigator for a Health Canada approved clinical trial that is examining the use of Vyvanse in adults with Bulimia Nervosa. Vyvanse (a medication typically used to treat ADHD) has never been studied in this patient population so our feasibility study aims to provide early evidence in this area.

We have also conducted a small pilot study examining a novel, group-based, guided self-help intervention for individuals with Binge Eating Disorder (BED). We hope to continue this line of research and conduct a larger RCT testing this intervention in the coming year.

### ***A typical "Day in my work life":***

As a clinician researcher there can be a lot of variability from day-to-day. My morning however, usually starts out with answering emails and getting organized for the day. The rest of the day might involve



*Dr. Aaron Keshen*

seeing clinic patients for medication consults and initial assessments, facilitating a group in clinic, checking in with inpatients, meeting with research participants for study visits, discussing the status of our ongoing projects with my research staff and students, working on new grant proposals, administrative meetings, and managing the never-ending stream of paperwork!

***What I wish I knew (but didn't) when I first contemplated becoming a***

***researcher:*** I wish I knew that I could take a leap of faith into the research world. During my first five years after residency, I wasn't sure how to pursue a research career with minimal resources, training, or dedicated research time. A mentor from an eating disorder program in Toronto suggested that I jump into research by picking a simple question that intrigued me, and start collecting data that might help answer that question. That suggestion prompted me to connect with a local researcher in the department who helped me formulate a research question and protocol with sound methodology. The skills and sense of satisfaction gained from that first project, which required minimal time and no grant funding, gave me the confidence and motivation to develop bigger projects over the last several years.

***The most satisfying and frustrating aspects of doing research:***

The most satisfying aspect of research is attempting to develop ideas that could make a meaningful impact on clinical practice. Clinical outcomes in eating disorder treatment have not improved dramatically over 20 years, so developing creative ways to make

a difference is both gratifying (and challenging).

The most frustrating aspect has been handling rejections of manuscripts and grants. It's initially demoralizing to get these rejections, but I have found that it helps to take a few days to process the feedback and then dive right into the revision process.

***The experience that best prepared me for my position:***

I didn't have traditional research training (e.g., graduate school), so at the beginning, I developed small studies that didn't require funding and jumped in! This really taught me the basics through a lot of trial and error. I also relied heavily on collaborating with experienced researchers and learning from their feedback and insight through all phases of the research process.

***My research mentor(s): Dr. Joel Town***

has been involved with our research projects since the beginning. He has always been honest and direct with his feedback, and generous with his time. Whether it's helping us develop projects, sharing his expertise in research methodology/statistics, or reviewing grants/manuscripts, Joel has been there in supporting the development of our research program. I would also give some credit to my father (a retired philosophy professor), who encouraged me to look at problems in a creative and rigorous manner.

***My second career choice:*** I had always been fairly single-minded in my pursuit of a career in psychiatry, but my back-up plan was graduate school in either the field of neuroscience or psychology.

## Recently Awarded Grant Funding

### October 2018 Psychiatry Research Fund Competition

- **Dr. Gail Eskes** - Can Brief Mindfulness Training Enhance Working Memory Practice in Healthy Older Adults? (\$19,959.15)
- **Dr. Sandra Meier** - Social interaction and mental health in youth (\$20,000)

### October 2018 People with Lived Experience Research Fund Competition

- **Jad Sinno** - Managing symptoms of psychological distress, depression, and/or anxiety in the HRM: Treatment preferences and experiences of adults from diverse sociocultural backgrounds (\$16,300)

## Psychiatry Summer Studentships

- Matthew Arora/**Dr. Derek Fisher** (co-supervised by **Dr. Phil Tibbo**) - Differential effects of cannabis use on event-related potential (ERP)-indexed brain function in males and females
- Nacera Hanzal/**Dr. Sherry Stewart** - Drinking Motives Mediate the Relationship Between Conflictual Interaction and Alcohol Use within Undergraduate Romantic Dyads: A Lab-Based Experiment
- Ross Langley/**Dr. Rudolf Uher** - Conventional and Automated Analysis of Speech To Facilitate Diagnosis and Predict Mood Disorders in Youth
- Claire Reardon/**Dr. Cynthia Calkin** - Neuroprogression in psychiatric illness: The result of metabolic dysregulation and compromised blood-brain barrier?

## Research Day 2019

Research Day 2019 will be held on Friday, Nov. 8 at the Atlantica Hotel.

Applications to present will be distributed in May with registration starting in August.



# EDUCATION REPORT



## UNDERGRADUATE EDUCATION NEWS

### Recruitment

2019/2020 undergraduate teaching recruitment continues. If there are additional activities you are interested in participating in and have not added them to your IPP, there is still an opportunity to sign up by visiting the sign-up page on the faculty database <https://dalpsychiatry.ca/education/faculty-ipp-education-activity-signup>. Please contact **Kelly Hancock** at

[kelly.hancock@nshealth.ca](mailto:kelly.hancock@nshealth.ca) if you have any questions.

### IMU

In June, we will receive our annual cohort of students from the International Medical University (IMU) in Malaysia to participate in the psychiatry block of the Link Program administered by the Global Health Office. Several of our faculty and

residents will be involved in preparing the four students for entry into clerkship in September.

### Clerkship Placement

We're working on the development of two new sites for clerkship placements. Further details will be communicated in a future issue of *Headlines*.

## POSTGRADUATE EDUCATION NEWS

### Orals and Exams

The postgraduate program is currently planning the 2019 STACER exams, spring departmental orals, and OSCEs for the residents. The STACERs will be held May 2, 3, and 9; orals are May 30 and 31; and the OSCEs are June 6 and 12.

### End of the Year Party

We have also begun planning the end of year graduation exercise. The dinner and awards will be held on June 7 at The Prince George Hotel, with a reception beginning at 6:30 p.m. Formal invitations will be sent out in May.

### CaRMS Success

Thank you to all of the faculty and residents who made our CaRMS 2019 recruitment activities such a tremendous success this year. We are thrilled to have filled all eight positions in the residency program in round one of the CaRMS match.

We look forward to welcoming our new residents. New PGY-1's beginning July 1, 2019 are as follows:

- Shaheem Abid - University of Ottawa
- Kyle Godden - McMaster University
- Matthew McAdam - University of British Columbia
- Anastasia McCarvill - Dalhousie University
- Nadine Nejati - University of Toronto
- Aditya Nidumolu - McMaster University

- Alex Whynot - Dalhousie University
- Natasa Zatezalo - Dalhousie University

## Upcoming Psychotherapy Event

Dr. Nancy McWilliams, author of the classic book, *Psychoanalytic Diagnosis*, will be delivering the R.O. Jones Memorial Lecture this year on June 5. She has also agreed to offer a workshop for all residents and interested faculty on June 5 from 10:00 a.m. to 12:00 p.m. Further details follow.

Please RSVP to **Jen Brown** at [jen.brown@nshealth.ca](mailto:jen.brown@nshealth.ca) by May 27, if you plan to attend.

## Depressive and Self-Defeating Patterns: Clinical Implications

Nancy McWilliams, PhD, ABPP

Rutgers University Graduate School of Applied & Professional Psychology

Both “Depressive Personality Disorder” and “Self-Defeating Personality Disorder” are notably absent from the DSM and ICD. Our official taxonomies thus give clinicians scant help in fostering changes in depressive and masochistic patterns. Dr. McWilliams will describe anaclitic versus introjective depression and relational versus “moral” masochism, exploring the clinical implications of each personality style. She will draw from scholarly literatures in psychoanalysis, personality psychology, attachment, and neuroscience, as well as from her own case material.

*Learning Objectives:* After this presentation, participants will be able

- to identify differences between predominantly depressive and predominantly masochistic personality patterns;
- to differentiate between relational (anaclitic) and moral (introjective) masochism;
- to discuss the clinical implications of these overall conceptualizations;
- to manage countertransference reactions to clients with recurrent self-defeating patterns.

## CONTINUING PROFESSIONAL DEVELOPMENT NEWS

### Recent Highlights

2019/03/20 University Rounds  
Dr. Célyne Bastien, Université Laval  
*Neurophysiological Measures of Misperception: Sleep Spindles and Information Processing*

2019/04/17 University Rounds  
Dr. Kiran Rabheru, University of Ottawa  
*Transforming Healthcare for Dementia Prevention: Health Behaviour Change as First Line Medicine*

### Upcoming Events

2019/05/10 W.O. McCormick  
Academic Day Conference

Theme: *Do we have your attention?: ADHD and More*

Plenary Speakers: **Drs. Gail Eskes, Lara Hazelton**, Carlin Millar, Blanca Bolea-Almanac

Concurrent Speakers: **Dr. Sonia Chehil**, Neera Datta & Bonnie Waugh, **Dr. Risk Kronfli, Dr. Joseph Sadek**

Panel Discussion: **Drs. Katherine Black, Penny Corkum, Selene Etches, Lukas Propper**

Find more information at the following webpage: [dalpsychiatry.ca/s/womad](http://dalpsychiatry.ca/s/womad)

Register online: <https://register.essourceevent.com/register/register.aspx?EventName=AcademicDay2019>

### Rounds

2019/05/01 Child and Adolescent Psychiatry  
Dr. Susan McWilliam; Holly Murphy; Prasanna Kariyawansa  
*Trauma Informed Care and Psychiatry*



Rounds speaker Dr. Kiran Rabheru.

2019/05/08 Clinical Academic Rounds\*

**Dr. Cheryl Murphy; Mandy Eslinger; Dr. Chelcie Soroka** (PGY-3)

*"What lies beneath: exposing the hidden curriculum"*

\* MedEd -This session meets the DoP criteria for professional development in medical education for DoP faculty. DoP faculty may claim a maximum of one hour of professional development in medical education in their IPP after having attended and completing an evaluation of the session.

2019/05/15 University Rounds  
Kevin Gray, Medical University of South Carolina

*Youth Cannabis Use: What Do We Know and What Should We Do?*

2019/05/22 Clinical Academic Rounds

**Dr. Abraham Rudnick**

*Philosophy and Recovery Oriented Psychiatric/Psychosocial Rehabilitation (RO-PSR)*

2019/05/29 Clinical Academic Rounds  
**Dr. Josh Green** (PGY-5)

2019/06/05 R.O. Jones Memorial Lecture  
Nancy McWilliams, Rutgers University  
*Rethinking Madness: An Argument for a Dimensional View of Psychosis*

2019/06/12 Neuroscience Jeopardy  
**Drs. Omar Alwatban** (PGY-5), **Melissa Lahti** (PGY-4), **Nadia Hassanali** (PGY-4)

### Announcement

The last rounds session of the 2018-2019 academic year will be held on June 12. Rounds will begin again on September 18 with invited speaker Lori Haskell speaking on the topic of Trauma Informed Care.



# MED-ED MINUTE

A new addition to *Headlines*, the “Med Ed Minute” will introduce scholarly snippets to consider in your teaching practice.

## What is the hidden curriculum?

The hidden curriculum is a set of ethical, moral, and value-based teachings, influenced by organizational structure and culture that is communicated to learners, often in an indirect manner.<sup>1</sup> It involves the socialization to professional norms and rituals and is the unintended knowledge a learner gains outside the planned curriculum.<sup>1,2</sup>

## Why is it important?

### Establish a Climate of Humanism

- Involve learners in the process of clarifying the mission, goals, and ground rules for the clinical experience that embody humanistic values.
- Encourage presentations that integrate relevant psychosocial as well as biomedical information and management strategies.
- Move clinical round discussions to the bedside (in most cases), and encourage presentations that recognize the presence of the patient.
- Get to know learners as persons and address their individual and human needs.
- Promote a cooperative, respectful, and supportive, as opposed to a competitive, learning environment, where team members are encouraged to admit their mistakes and to communicate rather than hide their learning needs.

### Recognize and Use Seminal Events

- Giving bad news: recognizing, eliciting, clarifying, and dealing with feelings, concerns, or expectations.
- Focus attention on the use of excellent communication skills rather than the use of dehumanizing language.
- Assist a patient at a time of transition.

### Role Model

- Demonstrate desirable skills or behaviors.
- Comment on what you have done.
- Explain what you have done.

The hidden curriculum can impact (positively or negatively) the learner’s professional identity formation, their perception of the patient-doctor relationship, the care they provide to their patients, and their own health and wellness.<sup>1</sup>

## How can you help?

The table offers clinical teaching strategies, to consider in your teaching practice, to help shape the hidden curriculum.

### Actively Engage the Learner

- Involve learners in tasks that require humanistic skills, such as eliciting the concerns of patients.
- Ask questions and encourage learners to reflect on and to discuss what they have done or on what they have observed.
- Provide feedback to learners on what they have done.
- Engage the learners in projects that are likely to include the human dimensions of care, such as defining the team’s mission.

### Be Practical and Relevant

- Respect the limitations of time and resources.
- Make a humanistic approach integral and relevant to patient care.
- Focus on humanistic behaviors that are likely to improve outcomes.
- Focus on communication skills and management strategies that are feasible for the learner and are generally applicable.

### Use Ongoing and Multiple Strategies

- Reinforce and build on previous learning.
- Address differences in individual learning preferences.

Table adapted from Branch et al.<sup>3</sup>

Come to Clinical Academic Rounds on May 8 to learn more about the hidden curriculum.

## References

1 Hopkins, L., Saciragic, L., Kim, J., & Posner, G. (2016). The Hidden Curriculum: Exposing the Unintended Lessons of Medical Education. *Cureus*, 8(10), e845.

2 Karnieli-Miller, O., Vu, T. R., Holtman, M. C., Clyman, S. G., & Inui, T. S. (2010). Medical students’ professionalism narratives: a window on the informal and hidden curriculum. *Academic Medicine: Journal of the Association of American Medical Colleges*, 85(1), 124–133.

3 Branch, W. T., Kern, D., Haidet, P., Weissmann, P., Gracey, C. F., Mitchell, G., & Inui, T. (2001). The patient-physician relationship. Teaching the human dimensions of care in clinical settings. *JAMA*, 286(9), 1067–1074.

## EDUCATION KUDOS CORNER

### **Kudos Corner**

We are recognizing those members of the department who are engaging in continuing learning through faculty development activities, those who have shown a keen interest in teaching, and those that have excelled in education in some way. See who's been involved recently!

- **Amy Jones**, co-lead for the IWK/ Dalhousie Family Therapy Training Clinic, presented at the 2019 World Family Therapy Conference in Aberdeen, Scotland with financial support from the Weil Fund.
- The medical humanities coordinator for the Department of Psychiatry, **Dr. Abraham Rudnick**, hosted two well-received workshops on the Critical Review of Creative Writing for faculty acting as judges for the 2019 Dalhousie Student Writing Competition.

## FACULTY DEVELOPMENT

### Faculty Development Opportunities

#### Dalhousie Continuing Professional Development

##### **FacDev Thursdays Seminar Series (webinars)**

May 2 | 8:00-9:00 p.m. *IMG: a hard challenge or great potential?* with Dr. Abir Hussein

May 16 | 8:00-9:00 p.m. *Conflict Resolution* with Ms. Janice MacInnis

May 30 | 8:00-9:00 p.m. *Complexity and Risk* with Professor Jim Barker

To participate, simply login as a guest at:  
<https://dal.adobeconnect.com/cme-live>

It is recommended you login at least 15 minutes before the start time.

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##### **New Brunswick Medical Education Forum - 2019**

Fredericton, NB | Thursday, May 2 & Friday, May 3, 2019

For more information and to register, please contact Megan Gallant at [megan.gallant@horizonnb.ca](mailto:megan.gallant@horizonnb.ca).

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##### **Educating for Medical Professionalism Online Course**

May 6 - June 17, 2019  
Registration fee: \$60

For more information or to register please visit [https://medicine.dal.ca/departments/core-units/cpd/faculty-development/programs/Fundamentals\\_Teaching.html](https://medicine.dal.ca/departments/core-units/cpd/faculty-development/programs/Fundamentals_Teaching.html)

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##### **SAVE the DATE | 5th Annual Medical Education Institute**

*It's All About Communication*

The event takes place at Fox Harb'r Resort Oct. 25, 2019

Registration to open soon. No fee to attend. For more information as it becomes available, please visit <https://medicine.dal.ca/departments/core-units/cpd/faculty-development/programs/Education-Institute.html>.

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##### **Tutor Skills Development Program**

Are you new to tutoring in the UGME curriculum and looking for resources to support you in your role? Faculty Development offers an online module to introduce you to managing small group learning as well as twice a year tutor practice sessions with simulated tutorial groups. The online module is available anytime, the practice sessions are offered late summer and fall (based on interest).

For more info or to be given access to the module contact [FacDev@Dal.Ca](mailto:FacDev@Dal.Ca)

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For more information on Faculty Development and their programs, email them at [facdev@dal.ca](mailto:facdev@dal.ca).



# CHILD & ADOLESCENT PSYCHIATRY REPORT

## Awards & Recognitions

We would like to extend our sincere congratulations to **Drs. Herb Orlik** and **Aidan Stokes** on 45 years of dedicated services to our Maritime children and youth at the IWK Health Centre. Drs. Orlik and Stokes were recognized on April 10 at the IWK STARS Dedication Dinner.

## 12th Annual Atlantic Provinces Child and Adolescent Psychiatry Conference

Please join us at White Point Lodge Beach Resort for the Atlantic Provinces Child and Adolescent Psychiatry Conference (APCAPC) taking place May 31 – June 1, 2019. Faculty and residents are encouraged to attend and also to consider submitting abstracts for presentation. Registration is now open. For more information please contact Debi Follett at [Debi.Follett@iwk.nshealth.ca](mailto:Debi.Follett@iwk.nshealth.ca)

## Lean Work

The Division of Child and Adolescent Psychiatry within the IWK Mental Health and Addictions Program continues to engage in system change in child and adolescent mental health service delivery. The co-leadership commitment to this process will improve upon processes including access to patient care utilizing research-based best practices.

Lean work meetings have begun for the Autism Specific Care team with the first full team meeting taking place on March 29. This first event left



(L-R) Drs Herb Orlik, Krista Jangaard, president & CEO of the IWK Health Centre, and Aidan Stokes (photo: Erin Lynch, IWK).

the team encouraged and a plan for projects that will be worked on with sub-committees during the upcoming months.

Planning has begun for work specific to child and adolescent psychiatry to begin in June.

# SUN LIFE FINANCIAL CHAIR IN ADOLESCENT MENTAL HEALTH REPORT

## News

With his appointment to the Senate of Canada, **Senator Stan Kutcher** has stepped down as the Sun Life Financial Chair in Adolescent Mental Health, effective February 28, 2019. Chair activities will continue until September with **Dr. Yifeng Wei** acting as director.

## Conferences

Dr. Wei, and Jennifer Ashton traveled to Yellowknife for a meeting with project partners who are working on creating a mental health literacy

curriculum guide resource for Indigenous populations. The meeting consisted of gathering research for the project with all those involved, which includes educators, elders and youth from indigenous communities in Northwest Territories, British Columbia, Nova Scotia and Alberta.

Chair team member Mallory Comeau traveled to Myrtle Beach, South Carolina for the Southeastern School Behavioural Health Conference. The conference was hosted by the University of South Carolina's School Behavioural Health Team and welcomed educators, administrators, researchers and youth serving personnel. Several States in the U.S. are beginning to mandate mental health education in the school curriculum, so the audience was very interested in the work of the Chair. Both online courses in particular were highlighted as it allows them to engage with the material without having to travel for training.

## CPA Mental Health Week

Members of the team participated in Charles P. Allen High School's annual mental health week. The event is organized by the youth health centre and run by members of the Jack.Org student team. The week consists of various speakers and classroom workshops that focus on mental health related topics. This was the Chair's third year participating and the team was able to present to over 400 students during their

two-day attendance. The two sessions focused on using the right words to describe how we're feeling to help reduce stigma around mental illness and the other discussed life after school pulling tips from both the *Know Before You Go* and *Transitions* resources.

## Academy Speaker Update

The upcoming Mental Health Academy is set to take place on July 19. Returning from previous years will be **Dr. Penny Corkum**, who will present on ADHD; Moe Green will return with a group of male youth who will discuss an innovative approach to a gendered healthy living class; Dr. Chris Gilham from St. Francis Xavier University, Andrew Baxter from Alberta Health Services and Dave Mackenzie from the B.C. School Counsellors Association to deliver professional development sessions on the *Mental Health & Curriculum Guide* and *Go-To Educator Training*. Senator Kutcher will be delivering a keynote at the Academy and we are also very excited to share that a representative from the WE Foundation will be joining us to deliver an empowering session on the amazing work that they are doing both nationally and internationally. Registration is open and all updates to the schedule can be found at [mentalhealthacademy.ca/](http://mentalhealthacademy.ca/)



Chair team member Mallory Comeau at the Southeastern School Behavioural Health Conference in Myrtle Beach.

# DR. PAUL JANSSEN CHAIR IN PSYCHOTIC DISORDERS REPORT



In addition to the ongoing Canadian Institute of Health Research (CIHR), Dalhousie Psychiatry Research Fund (DPRF) and Canadian Research Initiative in Substance Misuse (CRISM)-funded research projects in cannabis and psychosis, the Dr. Paul Janssen Chair in Psychotic Disorders, **Dr. Phil Tibbo**, was recently successful with the Canadian Consortium for Early Intervention in Psychosis (CCEIP; [www.epicanada.org](http://www.epicanada.org)) in a knowledge translation grant from Health Canada for the development of clinical order sets around problematic cannabis use in early phase psychosis and cannabis induced psychosis.

A clinical order set is a medical checklist offering up evidence-based treatment options in a single user-friendly interface directly to Health Care Professional's (HCP) at the point of diagnosis and treatment decisions. These medical checklists integrate up-to-date, standardized, best practices into a clinician's workflow.

The primary objective for the development and implementation of this cannabis focused clinical order set is to promptly and successfully identify, diagnose and treat cannabis induced psychosis in youth in general, as well as in those youth and young adults already in care in early intervention services for psychosis. In addition to increasing overall knowledge around diagnosis and treatment of cannabis induced

psychosis as legalization comes into effect, this clinical intervention will also facilitate the standardization of diagnosis and treatment, reducing the risk of errors in the treatment work flow. Overall, the development of this order set is aimed to optimize mental health outcomes in youth and young adults in the context of cannabis use.

Dr. Tibbo is working with other leaders in this area across the country in the development of these order sets. A needs assessment was developed with the steering committee and is currently being rolled out to help inform the next phase of this order set development. This order set and its development process (in addition to other recently developed order sets by CCEIP) has been invited to be presented at various national and international meetings (e.g. WPA World Congress of Psychiatry).





## NEWS FROM THE DEPARTMENT

### **Better Nights, Better Days for Children with Neurodevelopmental Disorders (BNBD-NDD) National Research Study**

Upwards of 90 per cent of children with neurodevelopmental disorders (NDDs) experience sleep problems, including problems settling to bed at bedtime, night wakings, and early morning awakenings. These sleep problems, referred to as insomnia, can lead to impairment in various domains of daytime functioning, including emotion regulation, cognitive and psychosocial functioning. The negative effects are exacerbated in children with NDDs and may lead to increased symptom presentation, and additionally can interfere with the effectiveness of interventions focused on language development and positive behavioural supports.

Despite evidence of their safety and effectiveness, fewer than 15 per cent of parents have access to, and implement, evidence-based behavioural interventions for sleep problems. To address barriers to treatment, the interdisciplinary research team led by **Dr. Penny Corkum** has modified the *Better Nights, Better Days* (BNBD) program (a multi-component, online intervention that was developed through a Canadian Institutes of Health Research grant for typically developing children) so that it is tailored for parents of children with



*Better Nights, Better Days for Children with Neurodevelopmental Disorders (BNBD-NDD) is a transdiagnostic, evidence-based eHealth program for parents of children 4-10 years old with neurodevelopmental disorders and insomnia.*

NDDs, including attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorder (ASD), cerebral palsy (CP), and fetal alcohol spectrum disorder (FASD).

*Better Nights, Better Days for Children with Neurodevelopmental Disorders* (BNBD-NDD) is a transdiagnostic, evidence-based eHealth program for parents of children 4-10 years old with NDDs who experience insomnia. The BNBD-NDD program is tailored to support and empower parents with the resources and skills to help their children sleep better.

Supported by the Kids Brain Health Network (<https://kidsbrainhealth.ca/>), the BNBD-NDD program was

designed by a national team of pediatric sleep researchers including Dalhousie University's Dr. Penny Corkum (co-principal investigator), Dr. Sarah Shea, and Dr. Isabel Smith (co-investigators).

The BNBD-NDD program is being evaluated through a randomized controlled trial launching in the spring of 2019. The research team will be recruiting Canadian parents of children 4-10 years old with ADHD, ASD, CP, or FASD. Interested families can visit [www.ndd.betternightsbetterdays.ca](http://www.ndd.betternightsbetterdays.ca) for more information and sign up to participate.

## Mental Health Day Treatment News

The Mental Health Day Treatment Program (MHDTP) offers a unique service in the department of psychiatry. It is a holistic and patient-centered program that delivers intensive care to patients who often have a history of complex trauma, long-standing refractory anxiety-depressive symptoms, personality disorders, and difficulties in relational and psychosocial functioning. This six-week group-based psychotherapy program uses an integrated approach that combines multiple psychotherapy modalities (behavioural, cognitive, interpersonal, and dynamic), with the goal of teaching patients to live healthy, emotionally balanced and fulfilling lives.

A major focus of the MHDTP is processing emotional trauma. At the MHDTP participants work through complex and painful emotions related to attachment traumas without avoiding, circumventing or repressing feelings. In doing this work, a deeper perspective is gained and hurts are metabolized and integrated. This allows the participant to shift focus from the painful emotions associated with attachment trauma that engender helplessness, passivity and psychological distress, setting the stage for positive coping and transformation. Research conducted at our site indicates this intensive group psychotherapy program facilitates positive outcomes at both the symptom and characterological levels, as evidenced by changes in mental health, resilience, and attachment style post-treatment.

The MHDTP also contributes evidence



*Back row (L-R): Kim Morash, Alice Embree, Dr. Jackie Kinley, Andrew Welch, and Megan Horner. Front row (L-R) Marie Kavanaugh, Kate Sampson, Sandra Reyno, and Mary Clare Bauld.*

on best practices for the treatment of this population through an ongoing research program. There are currently three studies being conducted at the service:

1) An fMRI study that aims to identify how patterns of functional connectivity during exposure to trauma memories correlate with over or under modulation of emotion, symptom severity and treatment outcomes. Neuroimaging research on mental illness and psychotherapy may help us better understand possible mechanisms of illness and change, informing the design and implementation of more effective interventions. As such, this study is very relevant to the mission of the Department of Psychiatry, as it addresses two of the main goals directly: supporting research related to psychiatric medicine and the evaluation and informing improvement of clinical practice.

2) The service has designed a new

self-report measure that assesses emotion awareness/regulation, self-reflection/insight/mentalization and positive coping. A factor analysis will be completed to determine if these capacities separate into distinct groups that map onto the phase-based model of treatment and recovery.

3) The team is completing a meta-analysis examining the relationship between dissociation (over-modulation of emotion) and alexithymia.

For more information on the MHDTP please contact Marie Kavanaugh, program coordinator at 902.473.2500, or by email [marie.kavanaugh@nshealth.ca](mailto:marie.kavanaugh@nshealth.ca).



## AWARDS & HONOURS

### **Dr. Patricia Lingley-Pottie named Champion of Mental Health**

Congratulations to **Dr. Patricia Lingley-Pottie** who has been named a Champion of Mental Health by the Canadian Alliance on Mental Illness and Mental Health (CAMIMH). Dr. Pottie is a recipient in the Innovation – Researcher or Clinician category. Each year, Canadians nominate people and organizations that are making outstanding contributions to mental health across the country. CAMIMH honours recipients in seven categories.

Dr. Lingley-Pottie is the president,

CEO and co-founder of the Strongest Families Institute (SFI) and has dedicated her career to improving the mental health and well-being of children, youth and families through innovation. In 2000, she co-developed a distance-coaching service system using proprietary e-health software. Recently, Dr. Lingley-Pottie launched a new program for adults with anxiety and depression, called ICAN.

Dr. Lingley-Pottie and the other recipients will be presented with their awards during a ceremony in Ottawa in May. To learn more about Dr. Lingley-Pottie and the other recipients please visit [camimh.ca](http://camimh.ca).



*Dr. Patricia Lingley-Pottie*

### **Rachel Boehm awarded by QEII Foundation**

Congratulations to Rachel Boehm, director of the Mental Health and Addictions Program in the Central Zone, who was one of three recipients of the QEII Foundation's Chris Power Leadership Development Award. This award provides a grant for leadership development studies for employees who work with programs that are part of the QEII Health Sciences Centre. Rachel's grant will support her in completing a Restorative Justice Certificate with Simon Fraser University. The certificate will provide her with the skills she needs to use restorative justice practices such as mediation, conferencing and circles, and to use those skills in managing and restoring relationships. The theory and tools will help her become more effective in mediating conflict and finding common ground amongst diverse stakeholders. Rachel recently



*(L-R) Chris Power and Rachel Boehm.*

took part in a restorative circle and was able to appreciate its value. "It offered a family an alternative to litigation, and I was able to witness how restorative practices can provide healing, closure and a way forward," she says. "It is one of my deepest held beliefs that when humans listen to one another, with true intent and attention, we discover our

interconnectedness with each other and the world. Through the exchange of stories and personal experiences, and not just opinions, we can find the common ground on which to bring about positive change and heal from past hurts." Rachel was presented with her award by Chris Power at the NSHA luncheon on April 24.

# MEET A STAFF MEMBER

*Meet a Staff Member* allows you to be introduced to all the members of our administrative staff. In this issue we introduce you to **Kelly Hancock**, undergraduate education coordinator.

Kelly joined the Department of Psychiatry in December 2018 after spending 10 years working for McMaster University in Ontario.

Kelly coordinates all aspects of undergraduate education (years I-IV) and is the point of contact for all matters regarding medical students rotating through psychiatry. She is responsible for the administration and coordination of the undergraduate program including curriculum delivery, clinical assignments, preceptor recruitment, supervision evaluation, data collection, communication and elective requests from local and external students. She provides administrative support to the director of undergraduate education, the director of education, and the medical humanities coordinator.

Kelly also supports and serves as an active member on various departmental and Faculty of Medicine education committees. Please contact Kelly at (902) 473-5633 or [kelly.hancock@nshealth.ca](mailto:kelly.hancock@nshealth.ca) if you are interested in any teaching, clinical supervision, participation in exams, or have any general undergraduate questions.



*Kelly Hancock*



# HUMANITIES CORNER



## Student Writing Competition

The 2019 Dalhousie Student Writing Competition closed on April 1, 2019, and we are thrilled to announce this year's first place awardees. Robin MacDonell from the University of British Columbia was the winner in the medical student category for *Uncomfortable*. In the postgraduate trainee category, our own **Dr. Patricia Celan** wrote the winning entry, entitled *Sunrise*. Read a portion of each of the winning entries below. To read them in their entirety please visit our website at <https://medicine.dal.ca/departments/department-sites/psychiatry/education/medical-humanities/writing-competition.html>. Thank you to all of the students, trainees, and faculty who participated this year.

### Uncomfortable

She woke up in ICU today and called her mom first  
Her mom lives alone and she calls her every Tuesday  
She wanted the student to see and do everything  
"You have to learn hon, we all do"

The general surgeon says she's a schizophrenic  
The internist, an addict who likes cocaine  
The nephrologist thinks she probably overdosed  
Found down with rhabdo, her kidneys failing

I thought she was nice. Her nurse agreed  
We were ignored

My dog sometimes sniffs out dead mice  
She flings them about and dances after them  
Then shakes them in her jaws with pure delight  
I'm grossed out, but I don't really mind

A patient likes to watch video footage of death  
Terrorist attacks, hangings, executions  
She details her favourites, they make her feel more alive  
I'm grossed out, and I mind so so much

My mind should be neutral. No judgement  
Shaking hands probably give me away

### Sunrise

We could have stopped at a motel and continued our drive  
in the morning. We could afford it even though money was  
tight. It was just one more night. But we didn't stop.

"We don't need to stop for the night! I can drive!" I insisted  
to my sleepy husband that night.

"I don't know, you haven't driven the rental so far." He  
responded cautiously.

"It'll be fine, just show me. I'm a good driver and you know  
that I can do it. I've pulled plenty of all-nighters before in  
school. This way we can save money on a motel. Plus, we'll  
have more time at our new place together if we get through  
this part of the road trip faster."

He sighed, well aware that he could not convince me  
otherwise – as usual. He sighed, patted my knee gently, and  
pulled into a self-serve gas station. After he filled up, I got  
out and reached for his hand. We held hands and walked  
over to the dark nothingness beside the gas station. I leaned  
into him, feeling the comforting scent of my home, my  
everything, my husband. He put his arm around me, kissed  
my forehead, and we looked up at the stars, witnessing  
the incomprehensible beauty of a universe larger than us.  
Snuggling alone at midnight, in the middle of nowhere, I felt  
peace.

"Ready to drive?" He asked.

I nodded.

## An interview with a creative writing instructor

Humanities coordinate, **Dr. Abraham Rudnick** recently sat down with creative writing artist and instructor, Jaime Forsythe. Jaime was the instructor of the latest creative writing review workshops for faculty members in the Department of Psychiatry. These workshops were conducted in part as preparation for the department's annual writing competition review and to enrich our understanding of the human condition using literature, which is so important for psychiatry.

R: Jaime, welcome and please tell us about your creative writing and instruction background.

J: Thanks so much Rami for having me as a guest in the department this month. I completed a Master's in Fine Arts in Creative Writing through the University of Guelph, where my thesis was a novella. Since then, I made a genre switch, and have published two books of poetry. I've also been fortunate to teach in a variety of venues, and am currently finishing instructing a poetry class at Dalhousie. I've also given workshops at Mount Allison University, at the Writers' Federation of Nova Scotia (WFNS), and through the WFNS Writers in the Schools Program. In addition, I have led a few different types of community creative writing programs and sessions for youth.

R: Short creative writing is commonly divided into at least three types: poetry, stories, and essays. We will focus on poetry and stories, rather than on essays which are non-fiction. In what ways are poems and stories different and similar?

J: Poetry and short stories feel closely related to me—maybe even more so than short stories and novels. Both a poem and a short prose piece, such as a story can effectively hold a glimpse or a moment, make use of concision and preciseness, and are forms where every word counts and must build towards the overall tone or mood of the piece. Of course, there are elements we might look for in a poem that we might be less likely to find in a story: line breaks, for example, or use of metre and rhyme, or at least a particular attention to sound. At the same time, there are writers who blur the boundaries between these two genres. Prose poetry doesn't use line breaks, and the writer Lydia Davis, for example, has prose pieces that are usually classified as short stories that are only a few lines long. So, I think that sometimes it depends on the writer's intention, and how they are either using in a more conventional way, or pushing against genre to best express their story or idea.

R: What are key aspects to address when reading a poem, recognizing that generalizing across time and place may be challenging, for example, guidelines for Haiku from pre-modern Japan may differ considerably from guidelines for modernist Western poetry such as T.S. Eliot's seminal *The Waste Land*?

J: I think there are some elements that could be addressed in general, although each one may or may not be present in any particular poem. In poetry, it would be helpful when relevant to pay attention to what is happening in terms of imagery (description, vividness), rhythm and sound (metre, flow and feel of syllables, rhyme), how the lines and

line breaks contribute to the overall effect of the poem, and how the language choices, or diction, create a tone or atmosphere. Reading poetry aloud can be very useful in hearing some of these elements, especially the subtler elements of sound patterns and rhythm.

R: What are key aspects to address when reading a story, recognizing that guidelines for stories may be more similar across time and space than guidelines for poetry?

J: In a short story, I might first observe the point of view, its characters and dialogue, setting (where and when is it happening, in terms of geography and history – known or imagined), conflict or tension, plot, and theme. As with poetry, I also look for vividness and the use of original detail and description. I want to be convinced of the world and people in a short story, whether or not these elements are meant to be realistic or fantastical. I also want to be surprised—I hope that the writer will take me somewhere I couldn't have expected or predicted before the story began.

R: As a creative writer, what suggestions do you have for aspiring creative writers?

J: I recommend reading as widely as possible, both within and outside of one's comfort zone. Connecting with other like-minded writers – whether by learning in classes or in workshops, forming a writing group, and/or attending literary events in-person or virtually – is the best way I know to stay motivated. Finally, I recommend giving yourself permission to experiment, to try again, and to fail better.

R: I suggest that people who are interested in the process of creative writing read publications about that by creative writers who are also teachers of creative writing, such as you. For example, for poetry I suggest the book *How Poems Get Made* by James Longenbach, and for stories I suggest the book *Steering the Craft: A 21st Century Guide to Sailing the Sea of Story* by Ursula K. Le Guin. What would you recommend?

J: Those are great suggestions. For fiction, I like the book *Bird by Bird* by Anne Lamott, which is funny and relatable and breaks the writing process down into digestible steps. I repeatedly return to poet Mary Ruefle's book of lectures *Madness, Rack, and Honey*, which is strange and delightful in its thinking about poetry and living a life as writer. I also find reading interviews with writers instructive and inspiring, e.g., The Paris Review has an impressive

amazing archive online.

R: Thank you, Jaime, for sharing your experience and insights in relation to creative writing. Medical humanities (and arts) benefit from such contributions, which can facilitate mental health education, research and practice.

## PHOTO FEATURE



*Jama Masjid, New Delhi (Photo by Dr. Shabbir Amanullah).*

### HEADLINES SUBMISSIONS

**Headlines** aims to provide a forum for the exchange of information, ideas, and items of general interest to the faculty, fellows, students and staff of the Department of Psychiatry. Your contribution(s) are needed and greatly appreciated.

The next issue of **Headlines** will be distributed on July 2, 2019, with the deadline for submissions to be June 14, 2019.

Please send all submissions to Kate Rogers: [Kate.Rogers@nshealth.ca](mailto:Kate.Rogers@nshealth.ca)