

Department of Psychiatry HEADLINES



The Dalhousie University/Capital District Health Authority Saint Lucia Mental Health Wellness Center Commissioning Team hosts their St. Lucia Partners in Halifax in September. L-R: **Ed Gordon, Michael Teehan, Scott Theriault**, Permanent Secretary Felix St. Hill, **Ian Slayter**, Francisca Plummer, **Sonia Chehil**, Jennifer Joseph, Dorothy Edem, and **Ricardo Salcedo**.

Working Together for Change Both Here and Abroad: The Saint Lucia Project

Submitted by: Dr. Sonia Chehil

The Department of Psychiatry and the Capital District Mental Health Program have begun a collaborative venture in the Caribbean nation of Saint Lucia — a venture that builds upon a longstanding relationship between the Dalhousie University Department of Psychiatry and the Saint Lucia Ministry of Health.

This particular journey began on July 17, 2009 when the Department was approached by the Saint Lucia Mental Health Reform Project to provide technical assistance to their team for the commissioning of the Saint Lucia National Mental Wellness Center. This sprawling, beautiful new facility is approaching its final phase of construction and is due to open its doors early in 2010. The Saint Lucia National Mental Wellness Center will

provide a continuum of in-patient psychiatric services, from acute to long term residential care, with a focus on rehabilitation and recovery for persons with neuropsychiatric disorders.

On July 27 a team of clinicians and administrators including **Drs. Ian Slayter, Michael Teehan, Ed Gordon**, and Ms. Dorothy Edem were brought together by **Dr. Scott Theriault** to discuss the merits of being involved in such a partnership. By August 11 the Dalhousie/CDHA Saint Lucia Mental Health Wellness Center Commissioning Team was established and four members of the team prepared to embark on their first mission to Saint Lucia.

In the first week of September, Scott, Ian, Dorothy, and Ed joined me in Saint Lucia to meet the Saint Lucian team

and develop a collaborative work plan dedicated not only to the opening of the new facility but also to the establishment of programming within the hospital in keeping with international standards in mental health care. On September 13 a team from Saint Lucia including Mr. Felix St. Hill, Permanent Secretary of Health, Ms. Jennifer Joseph, Coordinator of the Mental Health Reform Project, and Ms. Francisca Plummer Gabriel, responsible for facility policy/guideline development, travelled to Halifax to review CDHA and IWK hospital based psychiatric services.

For the Saint Lucia team the visit to Halifax was highly valued. According to the team the visit helped set the stage for the development of appropriate

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Message from the Head

Dr. Nick Delva

The efforts of members of our Department and the CDHA Mental Health Program are proving to be highly effective in helping a small nation in the Caribbean. Our International Psychiatry Section has recently collaborated with the Ministry of Health in St. Lucia to enable the provision of comprehensive psychiatric care to its population of 161,000 souls. The Section has recently undergone a review of its operations, and the preliminary report is highly complimentary: the work of the Section has been excellent, and far greater, in quality, quantity, and impact than would be expected in a Department of our size. At this point in the evolution of the Section, a greater number of the members of our Department are joining in the effort, and finding the experience to be both rewarding and illuminating.

In the last issue of *Headlines*, **Dr. Kosuke Kajitani**, one of our two current Sobey Fellows, answered the "10 Questions for a Dalhousie Psychiatry Researcher" put to him by **Ms. Jennifer MacDonnell**. In this issue you will find the same questions answered by the other Sobey Fellow, **Dr. Mirko Manchia**, who is very happy to have the opportunity provided by the Fellowship to work with **Dr. Martin Alda** on the genetics of bipolar disorder. We are very grateful to Mr. Donald Sobey for his generous support of junior researchers in our Department.

Dr. Stan Kutcher, the holder of the Sun Life Financial Chair in Adolescent Mental Health, and his team continue to lead the way in the provision of education on adolescent mental health, and the development of policy and strategy to serve the mental health needs of young persons. We also congratulate Dr. Kutcher on his recent success on winning the Liberal nomination for the federal riding of Halifax.

You will enjoy a new, regular feature, "Humanities Corner", seen for the first time in this issue of *Headlines*. It will be written by **Dr. Lara Hazelton**, our Departmental Humanities Coordinator. You are encouraged to contact Dr. Hazelton if you are interested in how history, literature, art, and other humanities relate to psychiatry.

On September 30, www.oneinfive.ca was launched at a media conference at the Nova Scotia Legislature. The Department of Psychiatry has sponsored this "microsite" (a web site with a limited lifespan) in order to draw attention to the importance of mental healthcare, and to mobilize public support for the development of a mental health strategy for Nova Scotia and an appropriate level of mental health funding in this province (the current allocation of 3.5% of the provincial health budget is not nearly commensurate with the burden of mental illness).



Regular readers of *Headlines* will have observed that my prognostications to date on the AFP have at times been more hopeful than accurate. At this point, a quotation from a late-1942 speech by Sir Winston Churchill comes to mind: "This is not the end; it is not even the beginning of the end, but it is, perhaps, the end of the beginning." **Dr. Scott Theriault, Ms. Carolyn Sisley**, and I continue to devote long hours to this effort, and I hazard a guess that we may actually be at the beginning of the end in our pursuit of a new Academic Funding Plan!

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Department of Psychiatry HEADLINES

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Administration Section

Submitted by: Carolyn Sisley
Senior Administrator

Individual Practice Profile Meetings

IPP meetings are currently underway. If you have not submitted your forms or booked your annual meeting, please contact **Ms. Linda Ford** at 473-6214 or Linda.Ford@cdha.nshealth.ca.

Update on AFP Negotiations

The Memorandum of Understanding that the Department of Psychiatry, Doctors Nova Scotia, and the Department of Health signed in May has not yet been implemented. This temporary agreement is to increase our total funding envelope, and also states that a final AFP would be reached by the end of October 2009. Questions regarding the ongoing negotiations can be directed to members of the Negotiating Team: **Dr. Nick Delva**, **Dr. Scott Theriault**, and **Ms. Carolyn Sisley**.

Change in the Deadline for Activity Hours Submissions

Faculty members are reminded that the Department Finance Committee has reduced the grace period for submission of faculty activity information from eight weeks to two weeks. The activity reporting process remains the same and faculty will continue to utilize the One45 system to submit their information. A link to the system is on the front page of the departmental website and can be accessed from anywhere there is an internet connection. Questions can be directed to **Ms. Carolyn Sisley** at 473-3868 or Carolyn.Sisley@cdha.nshealth.ca.

Faculty Development Funding

Faculty members are reminded that there is funding available through the Departmental Faculty Development Grant to assist in offsetting registration fees, tuition, or travel costs associated with activities that are training focused and will promote the department's vision, reputation, and skills development. Please note that funding is not provided for attending conferences. Individuals wishing to apply for funding must complete the approved application form which is available from **Ms. Carolyn Sisley**, Senior Administrator.

Promotional Material

You have likely noticed that the Department is sporting a new image these days. Our banner with our new motto "Educate. Discover. Heal." as well as our new colour scheme has been making the rounds to various events throughout the Department. The website is also looking a bit different, and we are in the process of developing information folders, fact sheets, and flyers that all have the same Departmental branding image. Keep your eyes open for collages of your colleagues in various formats. We are also in the process of revamping our departmental website; more news on the website will be available in the near future.

Renovations to Abbie Lane Room 4074

Many thanks to **Ms. Annette Cossar** for coordinating the renovation project in Room 4074. Please see page 10 for more details.

Oneinfive.ca

A province-wide campaign launched on September 30 urged government to step up their focus on mental health.

One in five people — or roughly 200,000 Nova Scotians — will experience a mental illness in their lifetime. That statistic lends its namesake to a new website — oneinfive.ca — unveiled at a news conference at Province House in Halifax.

Oneinfive.ca is urging the provincial government to establish a comprehensive, fully funded mental health strategy, starting in the spring of 2010.

"Oneinfive.ca is a place where every Nova Scotian can go to lend their voice to let our elected officials know that mental health needs much greater priority," says **Dr. Stephanie Casey**, spokesperson for the Department of Psychiatry at Dalhousie University.

The campaign and website are sponsored by Dalhousie University Department of Psychiatry and partners include Laing House, Mental Health Foundation of Nova Scotia, Kids Help Phone, Nova Scotia Psychiatric Association, Mental Health Coalition of Nova Scotia, Schizophrenia Society of Nova Scotia, and the Healthy Minds Cooperative.



Research Section

Submitted by: Jennifer MacDonnell
Research Administrative Assistant

10 Questions for a Dalhousie Psychiatry Researcher

This issue profiles a new Sobey Postdoctoral Fellow in Psychiatry Research, **Dr. Mirko Manchia**. “10 Questions...” is a recurring article in the Research Section of *Headlines*. If you are interested in being profiled in an upcoming publication, please contact **Ms. Jennifer MacDonnell** at Jennifer.MacDonnell@cdha.nshealth.ca.

1. *Where were you born?* I was born in Sassari, in Sardinia, Italy. Sassari is an historical town in the northern part of the island and is the second largest town in Sardinia.

2. *Why did you want to come to Dalhousie University?* Everything started in 2006 during the XIVth World Congress on Psychiatric Genetics that was held in Cagliari. At that time, **Dr. Martin Alda** visited the Clinical Pharmacology Unit and the Laboratory of Molecular Genetics and I had the chance to interact with him. It seemed to me that working at Dalhousie in the field of research on genetics and pharmacogenetics of bipolar disorder was a chance to improve my clinical and scientific knowledge tremendously.

3. *What is your educational background?* I am an MD, I graduated in 2004, and then I became a clinical pharmacologist in 2008. During the residency program I worked in the Lithium Clinic that was created in Cagliari 34

years ago and that is now the reference centre for the management of mood stabilizing long term treatment of bipolar disorder patients in Sardinia.

4. *What are your current research interests?* My main focus has been on treatment and research of subjects with bipolar disorder. In particular I am working on studies of the genetic basis of bipolar disorder and other related complex traits such as response to long term treatment with lithium.

5. *What type of research will you be doing while at Dalhousie?* I am working on the application of statistical models in order to dissect the complex pattern of interactions between genotype and phenotype in bipolar disorder. My projects will also delve into the investigation of genetic predictors of response to mood stabilizers and particularly lithium (pharmacogenetics/pharmacogenomics).

6. *Why did you choose psychiatry as a career?* When I was a medical student I was fascinated by a superb book written by Antonio Damasio: *Descartes' Error: Emotion, Reason, and the Human Brain*. Since then my professional path has led me to investigate the biological causes that underlie psychiatric illnesses, especially aiming to improve the conditions of the people affected.

7. *What was your second career choice?* Epidemiology and statistics would have been my second choice but they are actually still part of my research interests.

8. *What experience best prepared you for your job?* The work in the Laboratory of Molecular Genetics. During that period I learned how important it is to be careful and meticulous in designing an experiment, and this is the same kind of attention that I need when I diagnose and treat patients. In other words I learned a rigorous scientific methodology.

9. *Who are your mentors?* During my professional path I met three unique and special people that I have been so lucky to have as mentors: Dr. Rino Mancinelli (Human Physiology, University of Cagliari), Dr. Maria Del Zompo (Unit of Clinical Pharmacology, University of Cagliari), and Dr. Martin Alda (Department of Psychiatry, Dalhousie University).

10. *What do you consider the biggest challenge facing researchers today?* The ethical implications of research, especially in the field of genetics, are coming to the fore and will be, in my opinion, one of the most difficult issues to deal with in the near future.



Dr. Mirko Manchia

Department of Psychiatry Research Fund

The next deadline for funding is October 1, 2009. For more information, please visit <http://psychiatry.medicine.dal.ca/research/dgaf.htm>.

Psychiatry Research Day 2009

This year's event is scheduled for Friday, October 16 at the Lord Nelson Hotel. Now in its 19th year, Psychiatry Research Day promotes student involvement in research and showcases the Department's diverse expertise to our university and local communities. The keynote speaker for this year's event is Dr. Rémi Quirion, Professor and Scientific Director at the Douglas Mental Health University Institute and former Scientific Director of the Institute of Neurosciences, Mental Health and Addiction of the CIHR.

To attend Psychiatry Research Day, please complete the registration form found at <http://psychiatry.medicine.dal.ca/research/researchday.htm>. For more information, contact **Ms. Jennifer MacDonnell** at Jennifer.MacDonnell@cdha.nshealth.ca. The registration deadline is October 2, 2009.

Public Forum Discussing Genetics with Dr. Rémi Quirion

The Department of Psychiatry will be hosting a public forum discussing genetics in psychiatry. The event features Dr. Rémi Quirion, Professor and Scientific Director at the Douglas Mental Health University Institute and former Scientific Director of the Institute of Neurosciences, Mental

Health and Addiction of the CIHR. Dr. Quirion will be speaking on "Genetics and Alzheimer's."

Leading researchers in the Dalhousie University Department of Psychiatry will join Dr. Quirion in addressing the role of genetics in various psychiatry disorders.

The event will be held at the QEII Health Sciences Centre, Halifax Infirmary Site, 1796 Summer Street, in the Royal Bank Auditorium at 7:00pm on Thursday, October 15.

For more information, please contact **Ms. Jennifer MacDonnell**, Administrative Assistant, Research at Jennifer.MacDonnell@dal.ca or 473-2470.

Open Minds Across Canada — Mental Health Symposium 2009

The Canadian Psychiatric Research Foundation and Mental Health Partnership of Canada invite you to come and learn how to help and understand family and friends with a mental illness on November 7, 2009.

There will be three presentations: **Dr. Normand Carrey** presents "ADHD: Now you see it now you don't"; **Dr. Tomas Hajek** presents "Risk factors for bipolar disorder"; and **Dr. Phil Tibbo** presents "Early psychosis".

Please join us in Rm. 1613, Veterans' Memorial Bldg., QEII Health Science Centre, 5955 Veterans' Memorial Lane, Halifax on November 7 from 9:00am – 12:15pm (doors open at 8:30am). Admission is free.

Child and Adolescent Psychiatry Division

Submitted by: Julie O'Grady
Administrator, Child and Adolescent Psychiatry

Staff Changes

Given the number of administrative changes in recent months, I thought I would give you an updated staff contact list:

- Julie O'Grady, 470-8988, Administrator
- Bev Campbell, 470-2757, supports Mood Disorders Team, OCD/Tourette's
- Kim O'Toole, 470-6363, supports Anxiety Disorders Team, Youth Psychosis Team
- Terra MacLean, 470-8377, supports Bipolar Clinical & Research Subspecialty, C&A postgraduate
- Jen Fleming, 470-8066, Administrative Assistant to the Chief of Psychiatry
- Bonny Halket, 470-6871, supports Eating Disorders Team, Autism Diagnostic
- Dawn Jensen, 470-8376, supports PDD and ADHD Clinic (effective October 13, 2009)

Save the Date!

Laing House Masquerade Ball will be held on Saturday October 24, 2009. For more information visit www.lainghouse.org or call 425-9018.

Can a daily pill really boost your brain power?

Dr. Normand Carrey thinks that the following article from the September 20, 2009 issue of *The Guardian* is worth reading. In America and the UK, university students are taking illegally obtained prescription drugs such as stimulants used to treat ADHD, so they can study harder and party harder. But would you pop a smart pill to improve your performance? Margaret Talbot investigates the brave new world of neuro enhancement. To see this story with its related links, go to <http://www.guardian.co.uk/science/2009/sep/20/neuroenhancers-us-brain-power-drugs>.

Inpatient Psychiatrist — Child & Adolescent IWK Health Centre / Dalhousie University, Halifax, NS

The Department of Child and Adolescent Psychiatry at the IWK Health Centre and Dalhousie University, based in Halifax, NS, is currently recruiting a full time Child and Adolescent Psychiatrist for the Inpatient Child and Adolescent Services at the IWK Health Centre. This is the only Acute Inpatient Psychiatry Unit for Children and Adolescents in the province.

The IWK is an academic tertiary care health centre for children, women, and families in the three Maritime Provinces. The Division of Child and Adolescent Psychiatry at Dalhousie University is one of the largest academic groups in Canada. The Department also provides teaching and research through its affiliation with the Faculty of Medicine, Dalhousie University. The inpatient unit has excellent education opportunities, including medical student and resident teaching and supervision.

Halifax, the largest city in Atlantic Canada, has a great reputation as a friendly, family oriented city, “Canada’s Ocean Playground”, and boasts a rich diversity of recreational, cultural, and educational opportunities.

Applicants should have completed, or be in last year of completing training in child and adolescent psychiatry, have the equivalent of full member standing in the Canadian Academy of Child and Adolescent Psychiatry, and have interest in education as well as interest in clinical services. There are leadership positions available for those applicants with more expertise and experience. All applicants must be eligible for medical staff privileges with the IWK and specialist licensure in Psychiatry with the College of Physicians and Surgeons of Nova Scotia.

The successful candidate will be expected to participate in the Department’s educational activities, pursue research, etc.

Remuneration is based upon a competitive Alternative Funding Plan which pays for time spent in clinical service, teaching, and research. Successful candidates will receive an academic rank commensurate with qualifications and experience as per University protocols.

All qualified candidates are encouraged to apply although

Canadians and permanent residents will be given priority. Dalhousie University is an Employment/Affirmative Action employer. The University encourages applications from qualified Aboriginal people, persons with a disability, racially visible persons, and women.

Applicants should send a current CV, a statement of academic interests, and arrange to have three letters of reference (two of which must be academic) sent under separate cover directly to:

Dr. Herbert Orlik
Chief, Department of Child and Adolescent Psychiatry
IWK Health Centre
5850/5980 University Ave.
P.O. Box 9700
Halifax, Nova Scotia, CANADA
B3K 6R8
Phone: 902-470-8375
Fax: 902-470-8937

Dalhousie web site:
www.medicine.dal.ca
IWK Health Centre web site:
<http://www.iwk.nshealth.ca>

International Psychiatry Section

Submitted by: Sonia Chehil
Director, International Psychiatry

Working Together for Change Both Here and Abroad: The Saint Lucia Project

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programming for each level of care in the new facility and provided a framework for developing the facility’s standards, policies, and guidelines. They were encouraged to see that many of the challenges they face in Saint Lucia are similar to the challenges faced by our own mental health program. In addition, they realized that in many ways true “integration” of mental health into the social fabric of their communities may be easier in their setting.

“There are no assisted living services and little government assistance for persons with mental illness in Saint Lucia. In our setting, establishing vocational and support services just for persons with mental illness does not make sense. We want to use what already exists in community rather than create new ‘structures’. For example, in terms of vocational training — we want to build services for persons with mental illness into existing vocational training

programs that exist for everyone and support these services to meet the needs of persons with mental illness,” Ms. Joseph said.

In closing she added, “Working in isolation can leave you short-sighted and it’s very encouraging to come here and see that the model of care we are developing in Saint Lucia is on the right track.”

Reflections from Dr. Scott Theriault, Technical Lead for the Saint Lucia Project

Submitted by: Scott Theriault
Faculty, International Psychiatry

This collaboration offers an opportunity to share knowledge and expertise. The government of St. Lucia has acquired a large and beautiful psychiatric facility through the generosity of the governments of China and Taiwan and we have been asked to provide technical assistance in readying the hospital for commission and in developing programming, particularly for the long stay patients currently at the Golden Hope Hospital in Castries. Team members experienced first hand the nature of global mental health issues and the sense of commitment

to advance mental health care in a resource limited setting. For the clinicians on the team it was an opportunity to engage in a conversation about recovery and psychosocial principles, and for team members with an administrative background a welcome opportunity to engage in systems planning unencumbered by the multiple and at time conflicting layers of the Canadian “developed” mental health system.

The realization that to do more, with less, is possible where will and determination exists is a lesson that

flowed through our discussions; a realization which can and must influence our decision making at home. We are hopeful that ongoing collaboration will allow team members and other members of the Department and CDHA to be revitalized by the realization that change is possible, and allow an opportunity for learners to understand the principles underlying the development, and actualization of a mental health system geared towards the care of the most vulnerable and ill.

Dalhousie Joins PAHO/WHO to Conduct a Regional Workshop on the “Prevention and Control of Suicidal Behaviours” in Georgetown, Guyana

Suicide represents 1.4% of the Global Burden of Disease and accounts for nearly half of all violent deaths and almost one million fatalities globally each year.

According to the World Health Organization:

- In the year 2000, approximately one million people died from suicide: a “global” mortality rate of 16 per 100,000, or one death every 40 seconds.
- In the last 45 years suicide rates have increased by 60% worldwide. Suicide is now among the three leading causes of death among those aged 15-44 years (both sexes); these figures do not include suicide attempts which are up to 20 times more frequent than completed suicides.
- Suicide worldwide is estimated to represent 1.8% of the total global burden of disease in 1998, and 2.4% in countries with market and former socialist economies in 2020.
- Mental disorders (particularly depression and substance abuse) are associated with more

than 90% of all cases of suicide, however, suicide results from many complex socio-cultural factors and is more likely to occur particularly during periods of socioeconomic, family, and individual crisis situations (e.g. loss of a loved one, employment, honour).

“For every suicide death there are scores of family and friends whose lives are devastated emotionally, socially and economically ... Suicide is a tragic global public health problem. Worldwide, more people die from suicide than from all homicides and wars combined. There is an urgent need for coordinated and intensified global action to prevent this needless toll.”

*Dr. Catherine Le Galès-Camus
WHO Assistant-Director General*

Despite the tremendous burden of suicide globally, there has been little attention paid to understanding suicide and suicide behaviours and there is little information available to guide the development of suicide prevention initiatives. The causes and the factors

leading to a suicide death are diverse and involve a unique fusion of biological, psychosocial, and cultural factors for each affected individual. Suicide is always the tragic result of a dynamic complex process — it is never an isolated event occurring in a vacuum detached from the socio-cultural-religious-familial-political-economic and geographical context in which the individual lives.

A PAHO/WHO regional workshop on the “Prevention and Control of Suicidal Behaviours” was held in Guyana the second week of September, 2009.

Dr. Sonia Chehil was joined by Dr. Brian Mishara, President of the International Association for the Prevention of Suicide, Dr. Taghi Yasamy, WHO Medical Officer, Prevention and Management of Mental and Neurological Disorders, and Ms. Devora Kestel, PAHO Mental Health Sub-Regional Advisor for the Caribbean, as the facilitators of the workshop that aimed to assist the countries involved, which included Guyana, Trinidad & Tobago, and Suriname, to prepare a framework for national suicide prevention strategies using WHO guidelines.

In the Region of the Americas, there are more than 63,000 reported deaths by suicide every year and this is likely a grave underestimate of true figures due to weak information systems and underreporting in many countries. Guyana, Trinidad & Tobago, and Suriname report the highest suicide rates in the region. In Guyana the suicide rate has consistently hovered around 20-25 per 100,000 population for years — averaging 200 deaths annually.

There were 946 reported suicide deaths in Guyana from 2003-2007 — this translates to a suicide rate of 25 per 100,000 persons, over two times the global average. Eighty percent of these deaths were male and 80% were Indo-Guyanese. Sixty percent of all suicide deaths are attributable to pesticide poisoning. Suicide is the leading cause of death among young people age 15-24 and the third leading cause of death among persons aged 25-44. Among youth aged 15-19, suicide is the leading cause of death among females and the second leading cause of death among males.

Suicide is a global public health problem and suicide prevention is a shared responsibility. Understanding the modifiable biological, psychological, social, cultural, and environmental factors that may be amenable to universal, select, and targeted

prevention initiatives must inform both regional and national efforts to address suicide within the region of the Caribbean. The undisputed relationship between mental illness and suicide emphasizes the critical need to invest in this area. However, given the complexity of the confluence of factors that influence suicide risk, building a comprehensive mental health system may be necessary but is not sufficient to adequately address suicide as a public

health priority.

All three countries identified the prevention of pesticide poisoning, the scaling up of mental health services, establishment of community gatekeepers, training of primary care health workers in the identification and treatment of common mental disorder, development of an appropriate chain of care for persons at risk, and strengthening suicide surveillance systems as priority areas to address.



(L-R): Ms. Devora Kestel, PAHO MH Sub-regional Advisor; **Dr. Sonia Chehil**; Dr. Brian Mishara, President IASP; Dr. Taghi Yasammy, WHO MH Office; Dr. Leslie Ramsammy, MOH Guyana; and Dr. Kathleen Israel, PWR PAHO Guyana at the Regional Suicide Conference in September.

Improving Care for Persons Affected by Neuropsychiatric Disorders in the Caribbean: Building a New Way Forward through Partnership

The Dalhousie Department of Psychiatry is promoting collaboration among partners aimed to achieve greater gains for all through the harmonization and aligning of resources to achieve common goals. Discussions held with **Drs. Sonia Chehil** and Leslie Ramsammy, Guyana's Minister of Health, in Grenada and Saint Lucia earlier this month are gaining traction.

Grenada and Guyana have already announced plans to cooperate on improving mental health care in their two countries. Dr. Leslie Ramsammy and Grenada's Minister of Health Ann Peters are trail blazing a new way

forward to strengthening mental health capacity and hope to be joined by Saint Lucia's Minister of Health Dr. Keith Mondesir.

The Ministers stated at a news conference in Grenada on September 4, 2009 that they are confident that with the assistance and support from the Dalhousie Department of Psychiatry, both countries can fashion the delivery of mental healthcare that can have a positive impact on the entire region.

"I am hoping that with the assistance of stakeholders such as Dalhousie and the Pan American Health Organization we will start a movement so that we can

guarantee our people that they can live long healthy lives and meet their life's potential," Dr. Ramsammy said.

Grenada, which will assume the chairmanship of the 18th Caribbean Health Ministers conference to be held in Washington later this year, is hoping that the new initiative will help persons affected by neuropsychiatric disorders and that Caribbean countries can work together to reduce the burden of these non-communicable diseases.

Please Join Us in Welcoming Professor Vikram Patel to our Faculty!

We are pleased to announce the adjunct faculty appointment of Professor Vikram Patel to the Dalhousie University Department of Psychiatry. We will be hosting Dr. Patel in Halifax October 12-14 and we hope he will have the opportunity to meet many of you and experience a bit of our warm Maritime hospitality!

Vikram Patel, Professor of International Mental Health and Wellcome Trust Senior Clinical Research Fellow at the London School of Hygiene & Tropical Medicine, is a renowned global leader in mental health and the recipient of numerous awards and fellowships including the Rhodes Scholarship, the MacArthur Foundation Fellowship for Leadership Development, the Wellcome Trust fellowships, the Beattie Smith oration from the University of Melbourne, and, in 2009, the Chalmers Medal from the Royal Society for Tropical Medicine & Hygiene.

Professor Patel will be presenting at Clinical Academic Rounds on Wednesday October 14.

Professor Vikram Patel: "Closing the Gap for Mental Disorders"
Clinical Academic Rounds, October 14, 2009, 8:30 – 9:30am
Rm. 4074, Abbie J. Lane Bldg.



Sun Life Financial Chair in Adolescent Mental Health

Submitted by: Dr. Stan Kutcher

Sun Life Financial Chair in Adolescent Mental Health

Inaccurate Statements about Teen Suicide on the Internet

Only 44% of statements made on Canadian websites about teen suicide are evidence-based, according to researchers Ms. Magdalena Szumilas and **Dr. Stan Kutcher**. Their research found that non-profit organizations were more evidence-based than government sites, which were better than personal and media websites for providing accurate information. People looking at websites for information about teen suicide should look for two things to increase the odds that the information provided is accurate: the author is credited and there is a recommendation to consult a health professional.

"The Internet is an important source of health information for adults and youth, particularly for stigmatized illnesses like mental disorders," the coauthors write. "However, web-based information sources should be approached with caution because in this study more than one-half of the statements regarding youth suicide made on popular Canadian websites were not supported by the evidence base."

They identified 20 of the most commonly used websites by Canadians on youth suicide and compared the information with systematic reviews on youth suicide risk factors and prevention strategies.

"Authoritative mental health organizations in Canada should create and advertise the availability of evidence-based web information pertaining to youth suicide," recommend the authors. In Canada, suicide is the second leading cause of death among youth.

In 2009, the Canadian Psychiatric Association published Media Guidelines for Reporting Suicide (Available from: <http://publications.cpa-apc.org/media.php?mid=733&xwm=true>) to help media responsibly report on suicide.

This summary is part of a paper published in the September 2009 edition of the *Canadian Journal of Psychiatry*.

Evergreen: Building a Child and Youth Mental Health Framework for Canada

Canada does not have a child and youth mental health strategy. Recently, the Child and Youth Advisory

Committee (CYAC) of the Mental Health Commission of Canada (MHCC) embarked on a path destined to establish a child and youth mental health framework for Canada. This framework, entitled Evergreen, will complement and may provide child and youth context to the Mental Health Strategy for Canada currently being developed by the MHCC.

The Sun Life Financial Chair in Adolescent Mental Health Team is taking the lead in developing the Evergreen Framework. Dr. Stan Kutcher is chairing the Drafting Committee, charged with the actual writing of the framework document. Mr. Alan McLuckie is coordinating the project and providing research support.

Evergreen is believed to be the first national level mental health policy document to be created collaboratively relying entirely on online technologies. A truly collaborative process is established through the use of Socialtext, a web 2.0 technology, that has brought together, virtually, over 100 nationally and internationally recognized experts from a variety of child health and mental health domains. Structured into three

committees (Drafting, National Advisory, and International Advisory Committees), Evergreen unites these professionals with youth and parents who are interested in, or who have lived with or experienced mental illness. These committees are working together to build the mental health framework from the ground up.

Online public consultations are also being used to provide the general public with the opportunity to shape the future of children and adolescent mental health in Canada. The first public consultation, using online surveys and Facebook groups had over 1,000 participants of diverse background and age groups from all across Canada. The feedback provided through the online public consultations will be reviewed and used by Evergreen's committees to develop a document that is meaningful to all Canadians. We encourage all members of the Dalhousie community to participate in future online consultations.

All going according to plan, we aim to have the final draft of Evergreen completed in the Winter of 2010.

Our Team Evolves

Our five summer students have been working diligently on a variety of projects, including a resource on understanding adolescent anxiety, a youth mental health action guide, and research on the teen brain. When these

projects are completed we plan to post them for free access and use on our website and share them with mental health groups across Canada.

As we near our third anniversary the Chair's team continues to grow and evolve. We have a new communications team member, Ms. Christina Biluk as well as a research assistant, Ms. Alice Yao.

We have also lost a valuable member of our team in Mr. David Venn, who will be transitioning away from his PR duties to pursue a Masters Degree in International Development in the Netherlands. Over the past two and a half years David has been successful in communicating our vision, developing some of the Chair's signature programs, and building partnerships both locally and nationally. He will be missed, but we wish him the best in his academic studies and future career.

Help for Siblings

In response to a need expressed in the community, the Sun Life Financial Chair has developed two mental health guides for siblings. With low levels of awareness of Mental Health, there was a growing need for an educational resource for young people, who are have a brother or sister with a mental illness.

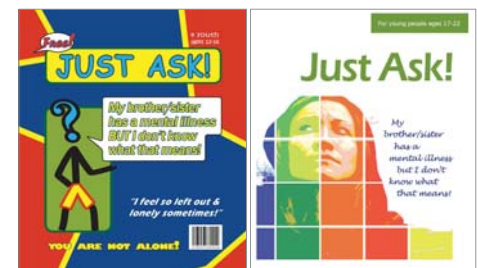
The guides were created in consultation with a youth advisory panel. The youth involved were able

to provide real life examples of what they experienced as siblings, what they wanted to share with others, and what they had wished they knew. This information was taken and translated into two guides — one focused on providing information for teens aged 12-16 and the other provides content for young adults aged 17-22.

The resource has been endorsed by national and international organizations including: Mood Disorders Society of Canada, Schizophrenia Society of Canada, Parents for Children's Mental Health, and Orygen Youth Health (Australia).

The guides will be launched officially later this fall, however, we encourage our friends and colleagues to begin using them right away with their patients and in the field.

Both guides are free for download at <http://teenmentalhealth.org/family.php>.



Two "Just Ask" guides are now available.

Education Section

Submitted by: Annette Cossar
Education Administrator

"What is old, is new again." That phrase can be used to describe the makeover to Room 4074 in the Abbie Lane Building. The room has undergone some minor renovations, a fresh coat of paint, and has had some long needed attention paid to it. The Department of Psychiatry is pleased to announce the refurbished space which will make available technology and equipment for use by our faculty, learners, and members of the Mental Health Program.

The room will be available for use as a videoconferencing suite. It will

also have the capabilities for classroom use which includes a Smartboard and Sympodium equipment. Yet to arrive is the new seating — so bear with us. We are also working on a room booking system which will be communicated when it has been set up. Please forward your room requests to **Ms. Carrie Wipp** at Carrie.Wipp@cdha.nshealth.ca.

Over the course of the next few weeks there will be training sessions organized which will be communicated and there has been proposed "faculty development" sessions on the usage

of the equipment for their teaching purposes.

There is a further plan to get the other teaching space on 4 Lane spruced up a bit. But until then, we hope you enjoy the modernized space!

Continuing Education Activities

Clinical Academic Rounds at the QEII

October 7: Dr. Peter Florence
 October 14: Special Lecture with Dr. Vikram Patel, professor of International Mental Health and Welcome Trust Senior Clinical Research Fellow at the London School of Hygiene and Tropical Medicine, "Closing the Gap for Mental Disorders"
 October 28: Dr. Alaghband-Rad, "ADHD Co-occurring with Substance Abuse: Clinical Challenges"
 November 18: Joint Rounds with Geriatric and Seniors Mental Health Dr. Keri-Leigh Cassidy and Susan Bowles, "To Use or Not to Use: Atypical Antipsychotics in Seniors"

Clinical Academic Rounds at the IWK

October 7: Dr. Adriana Wilson
 October 28: Dr. Anne Duffy
 November 18: Dr. Jonathan Brake

Clinical Academic Rounds at the NSH

October 9: SCOT Team
 October 23: Dr. Tanya Tulipan
 October 30: OT Services
 November 6: Emerald Coast
 November 13: Cole Harbour Team

University Rounds QEII

October 21: Dr. Scot Purdon, University of Alberta, "Cannabis & Psychosis: Increased Risk and Exacerbation of Symptoms"
 November 4: Dr. Stephen Kisely, Queensland Centre for Health Data Services, "Death from Preventable Physical Illness in People with Mental Illness: The Forgotten Epidemic"
 November 25: Dr. Jatinder Sareen, Assistant Professor Department of Psychiatry at the University of Manitoba

Upcoming Workshops

November 4, 2009: Dr. Stephen Kisely
Topic: "Introduction to Motivational Interviewing". Motivational Interviewing is defined as "a client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving client Ambivalence".
Location: Rm. 4074, Abbie J. Lane Building from 1:00 – 4:00pm

November 5, 2009: Dr. Stephen Kisely
Topic: "From the F-Statistic to Focus Group: An Introduction to Qualitative Research for Psychiatrists". Papers using Qualitative methods are increasingly common in Psychiatric Journals. This workshop is an Introduction to Qualitative Research for people who are more familiar with Quantitative Methods.
Location: Rm. 4074, Abbie J. Lane Building from 9:00am – 12:00pm

News & Announcements

Notices

Department of Psychiatry, Dalhousie University Guidelines for the Use of E-mail

The following was sent to the Department by **Dr. Nick Delva** on August 6, 2009. It is being reprinted here to ensure that it reaches the widest audience possible.

Ten suggestions to optimize the use of e-mail at work:

1. E-mail is not confidential. Do not write anything that you would not be comfortable seeing on the front page of the newspaper.
2. Be polite and respectful, never write anything personally critical or hurtful, and use bolding or capitals sparingly.
3. Do not send anything in the heat of the moment. You can always save an e-mail (in the Drafts file) before sending it, so as to give yourself time to cool down and think about it.
4. Consider whether a face-to-face or telephone conversation might be preferable — it's much faster to talk than write.
5. Ask yourself whether you have gone through normal channels in your attempt to solve a problem before going above the head of the person who should deal with the problem (and will have to deal with it anyway).
6. The message should be well written and brief; delete unnecessarily long strings of correspondence.
7. Send the minimum number of copies that will do the job.
8. To reply to an e-mail, send your response only to the originator of the e-mail, not to all of those copied in, unless there is a good reason to reply to some or all of those copied in.
9. Take care in forwarding material — the sender might not wish this (see also #1).
10. Enter an apt title in the subject space (this can comprise the whole message).

Humanities Corner

The Werther Effect

There would be far less suffering amongst mankind, if men — and God knows why they are so fashioned — did not employ their imaginations so assiduously in recalling the memory of past sorrow, instead of bearing their present lot with equanimity.

GOETHE, *The Sorrows of Young Werther*

“The Sorrows of Young Werther”, published in 1774, was the book that made Johann Wolfgang Von Goethe a literary celebrity. Told mostly in the form of letters between Werther and a friend, it is the story of a young man who commits suicide because he cannot be with the woman he loves. The book was not only popular in its day, but also led to “Werther Fever”, which saw young men identifying with the morbid passions of Werther and dressing in the distinctive outfit worn by him in the novel.

More concerning was the reputed link between the book and imitative suicide. Because of the dramatic and emotional way in which the story is told, suicide is made to seem like a glamorous and romantic act. At the time it was written, the book was banned in some areas, and even today the phenomenon of imitative suicide associated with news reports or media dramatizations is known as “The Werther Effect”.

To the modern reader, “The Sorrows of Young Werther” is probably less familiar than Goethe’s masterpiece, “Faust”. Nonetheless, it is an interesting book, and especially worthwhile reading for psychiatrists and others interested in how mental illness is portrayed in literature.

Are you interested in how history, literature, art, and other humanities relate to psychiatry? To find out more about ways to get involved, contact **Dr. Lara Hazelton**, Departmental Humanities Coordinator, at Lara.Hazelton@cdha.nshealth.ca.