

GLOBAL MENTAL HEALTH REPORT

FALL 2026



A report from the Centre for Global Mental Health



DALHOUSIE
UNIVERSITY

CENTRE FOR GLOBAL
MENTAL HEALTH

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EVENTS

CENTRE FOR GLOBAL MENTAL HEALTH HOSTS FIRST CONFERENCE

Mental Health Responses in a Changing World 2026: Innovative Responses to Humanitarian Emergencies

A diverse audience of policymakers, mental health practitioners, researchers, students, and community organizations gathered in early July for the Centre for Global Mental Health's first conference: Mental Health Responses in a Changing World 2026: Innovative Responses to Humanitarian Emergencies.

Inspired by the World Health Organization's 2025 World Mental Health Day theme, the conference responded to the urgent global need for effective, evidence-informed, and community-based mental health and psychosocial supports in humanitarian emergencies.

Delivered in a hybrid format through the keynote presentation, panel discussion, tabletop presentations, community spotlights, breakout sessions, and poster presentations, attendees explored responses to humanitarian emergencies that strengthen community resilience at home and abroad.

"These conversations reminded us that humanitarian emergencies take many forms," said Dr. Linda Liebenberg, the centre's program coordinator and moderator of the event. "Sometimes they are dramatic and highly visible—armed conflict, forced displacement, floods, fires, hurricanes, or pandemics. But oftentimes they are quieter, experienced through housing insecurity, persistent racism and discrimination, social isolation, poverty, climate-related anxiety, and in communities where access to relevant and meaningful care remains out of reach."

The conference reinforced another important truth, said Dr. Vincent Agyapong, the centre's director and head of Psychiatry for Dalhousie and Nova Scotia Health's Central Zone.

"Behind every humanitarian emergency is a person, a family, and a community whose mental health deserves the same urgency as their physical health."

Context and community: An inspiring keynote and expert panel

The conference opened with an Indigenous prayer led by Raymond Swell, an assistant professor in the English Department at Saint Mary's University.

Dr. Agyapong welcomed attendees to the event. His remarks highlighted how humanitarian emergencies affect mental health, the importance of research in informing policy and practice, and how mental health equity locally and globally is a collective responsibility.

Dr. Pamela Collins, Chair, Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, opened the conference with her keynote presentation "HIV, mental health, and humanitarian emergencies: understanding integrated responses." The presentation explored why mental health should be included in HIV care in humanitarian settings.

She reminded us humanitarian crises affect more than physical health. They disrupt families, communities, service-providing systems, and social networks, creating ripple effects that continue long after the immediate emergency has ended. Her keynote also reminded us mental health is interconnected with physical health, social and structural conditions, and the strength of political and economic systems that support people throughout their lives.



Dr. Pamela Collins delivers a keynote address.



Panelists with conference organizers and participants.

Following her keynote presentation, Dr. Collins participated in our panel discussion, joining the Honourable Wanda Thomas Bernard, Senator – Nova Scotia (East Preston); Dr. Ejemai Eboreime, researcher, implementation scientist, and assistant professor in the Dalhousie Department of Psychiatry; and, Kendall Paul, Mental Health Counsellor with the Indigenous Mental Health & Wellness Team at the Mi'kmaw Native Friendship Centre.

Our panel challenged us to think more broadly about how we respond to humanitarian emergencies. Their discussion explored the concept of power sharing, highlighting the importance of language and community-driven solutions and involvement in the research process.

Highlighting under-represented voices: Community Spotlight and Breakout Sessions

“One of the things I found particularly powerful was that today’s discussions never suggested that responses to mental health interventions in humanitarian emergencies lie solely in clinics, hospitals, or larger health systems,” said Dr. Liebenberg.

“Instead, we heard repeatedly that communities are extraordinary sources of innovation, resilience, and knowledge.”

Our three community spotlight sessions highlighted underrepresented voices and mental health initiatives at the community level. They illustrated how schools can become places that promote well-being, how families become advocates for systems change, how housing is healthcare, and how relationships and peer support can transform lives.

Several breakout sessions explored innovative mental health responses across a variety of contexts. We learned from experiences in Rwanda, Sudan, Nigeria, Tanzania, Jamaica, Bhutan, and here in Mi'kma'ki, Nova Scotia.

Despite the diversity of these contexts, the same principles emerged, underscoring how mental health is strengthened when communities, as knowledge holders and experts, are engaged.

Reflections and lessons learned

As the conference ended, Dr. Liebenberg reflected on the day’s presentations and shared six key lessons and their implications for advancing mental health and well-being.

1. Mental health is created long before someone enters a clinic
2. Equity is not an optional extra—it is the foundation of effective mental health systems
3. Communities are not simply recipients of care—they are creators of solutions
4. Relationships are the most powerful intervention we have
5. Research creates impact only when it changes lives
6. Hope is built through partnership

Dr. Liebenberg shared that together, these lessons represent a profound shift in how we view mental health, challenging us to think beyond responding to illness and to promote well-being and resilience at the individual and community level.

The conference also reflected several shared priorities around equity, partnership, prevention, innovation, and learning and ended with a call to action: *What will we do with what we know?*

Reflections on the centre's first conference continued through feedback gathered from attendees. Overall, feedback was positive with attendees noting they enjoyed the variety of speakers and perspectives shared and many indicating they gained new knowledge.

Attendees also shared suggestions to improve the event in the future, and the organizers will be considering those as it plans its next conference.

Building on the conference's call to action, Dr. Agyapong said progress depends on collaboration.

"One message resonated throughout the day: no single organization, profession, or country can solve today's mental health challenges alone. Progress depends on partnership, innovation, and communities working together to translate evidence into action."



The conference opened with an Indigenous prayer led by Raymond Swell, an assistant professor in the English Department at Saint Mary's University.



Tyler Simmonds (presenter), Dr. Linda Liebenberg (event moderator), and Dr. Ejemai Eboime (panelist) at the conference.



Somtoo Henry, MSc in Psychiatry Research student, presented at the conference.



Dr. Bala Harri, PhD in Psychiatry Research student, presented at the conference.

CELEBRATION EVENT

Advancing equitable mental health care in Nova Scotia: Transcultural Mental Health Program celebrates fourth anniversary



Attendees at the Transcultural Mental Health Program Anniversary event on March 6, 2026.

In early March 2026, leaders in government, Nova Scotia Health, Dalhousie University, community organizations, and person with lived experience spoke at an event to recognize the Transcultural Mental Health Program's fourth anniversary.

Launched in 2022, the program responds to treatment gaps for African Nova Scotians, Indigenous People, Newcomers, and those experiencing homelessness.

It operates through the Nova Scotia Brotherhood and Sisterhood Initiatives, Newcomer Health clinic, the Mi'kmaw Native Friendship Centre, the Rapid Access and Stabilization Program, and community mental health and addictions at Bayers Road, Bedford/Sackville, Dartmouth, and Cole Harbour.

"These communities were disproportionately affected by trauma, social inequities, systemic barriers, and cultural misunderstandings within healthcare systems," Dr. Vincent Agyapong, head of Psychiatry for Dalhousie University and Nova Scotia Health Central Zone, recounted at the event.

"Many were receiving primary care—but not equitable access to specialized psychiatric support in ways that were culturally responsive and trauma-informed."

With no additional funding available for physician resources to establish a new program, Dr. Agyapong turned to faculty members to see who was willing to dedicate one day a month at a primary care location serving these communities. While he hoped for four, 10 psychiatrists stepped forward.

Nova Scotia Health's Mental Health and Addictions Program also stepped up, providing essential administrative coordination and scheduling support. Patients who had previously fallen through the cracks were being seen, heard, and treated, said Dr. Agyapong.

Eventually, the team developed and submitted a request for physician resources. Recognizing the need, government responded favourably. The program was then transformed from volunteerism into a sustainable, structured model of care.

Since its inception, it has provided mental healthcare to hundreds of people from these under-served populations.

"Cultural competence encompasses accountability that goes beyond being kind, sensitive, and humble, to ongoing, continuous, and measurable work to build trust and skills—individually, organizationally, and within systems—toward health equity," said Sharon Davis-Murdoch, co-president of the Health Association of African Canadians, during her video keynote address.

One example she shared is the culturally-specific vaccination clinics that were set up during the COVID-19 pandemic.

In another video, Dr. Timothy Holland, family doctor and medical director at the Newcomer Health Clinic in Halifax, described the unique challenges experienced by Newcomers when accessing health services and how other professionals like social workers and case managers are key to bridging these gaps.

The Honourable Brian Comer, minister of addictions and mental health, acknowledged the role of the Rapid Access and Stabilization Program in providing access to care in rural parts of the province, and the rollout of integrated youth services across the province offering culturally competent care.

The anniversary event highlighted the strong community partnerships central to the Transcultural Mental Health Program's success.

“It’s been so wonderful to work as a team with the Transcultural Psychiatry program on Etuaptmumk, which means two-eyed seeing, approaches for community members to be heard and feel safe in their psychiatric care,” said Shonna Brown, mental health nurse at the Wije’winen Health Centre and cultural co-lead of the Indigenous mental wellness team.

Similarly, bringing psychiatrists into their space has made mental healthcare more available and more accessible, said Natalie Johnson, team lead for the Nova Scotia Sisterhood.



From left to right: Dr. Linda Liebenberg, Dr. Vincent Agyapong, Jennifer Glennie, Deputy Minister, Office of Addictions and Mental Health, and the Honourable Brian Comer, Minister of Addictions of Mental Health.

DR. MAHMOUD AWARA AND DOROTHY EDEM RECEIVE SPECIAL RECOGNITION AWARDS

During the Transcultural Mental Health Program Anniversary event, Dr. **Mahmoud Awara** and **Dorothy Edem** were presented with Special Recognition Awards.

Congratulations to Dr. Awara who received the award for his leadership of the Transcultural Mental Health Program and to Dorothy Edem who received the award for her role on the Transcultural Mental Health Advisory Council.

NATIONAL POLICY DIALOGUE

Translating Innovation into Impact: Scaling and Integrating Evidence-Based Supportive Text Messaging Programs into Canada's Care Systems

On Feb. 20, 2026, leaders from federal, provincial, and territorial governments, regional health authorities, Indigenous partners, philanthropy, academia, youth organizations, and digital health innovators convened for a National Policy Dialogue about integrating supportive text messaging into Canada's mental health care systems. The dialogue was co-led by the Dalhousie Centre for Global Mental Health and the Global Psychological eHealth Foundation. The Mental Health Commission of Canada presented about the landscape of mental health in Canada and the digital mental health opportunity.

The event presented over a decade of rigorous evidence supporting the use of supportive text messaging programs such as Text4Hope, Text4Support, and related adaptations. These programs deliver brief, automated, Cognitive Behavioural Therapy-informed supportive messages that reduce symptoms of depression, anxiety, stress, PTSD, substance cravings, and suicidal ideation. Participants shared operational lessons and their perspectives and identified cross-cutting themes.

KEY TAKEAWAYS INCLUDED:

- Supportive text messaging is one of the most rigorously evaluated digital mental health interventions globally.
- It is low-cost, high-reach, and scalable without requiring smartphones or data plans.
- Randomized controlled trials demonstrate reduced symptoms, hospital readmissions, and length of stay.
- Economic analyses demonstrate mean cost savings of more than \$7,000 per patient within six and 12 months post-discharge.
- National coordination is feasible and aligned with federal priorities, including 9-8-8 crisis services, equity, and emergency preparedness.
- Sustainable funding and intergovernmental collaboration are essential for scale-up.

PUBLICATION

Agyapong B, Liebenberg L, Eboreime E, Greenshaw AJ and Agyapong VIO (2026) Translating innovation into impact: a national policy dialogue on scaling and integrating evidence-based supportive text messaging into Canada's mental health care systems. *Front. Digit. Health* 8:1830295. doi: 10.3389/fdgth.2026.1830295



From left to right: Dr. Belinda Agyapong (President and CEO, Global Psychological eHealth Foundation); Professor Andrew Greenshaw (University of Alberta); Dr. David Anderson (Dean of the Faculty of Medicine, Dalhousie University, now former); Dr. Patricia Lingley-Pottie (CEO, Strongest Families Institute); Dr. Vincent Agyapong (Director, Dalhousie Centre for Global Mental Health); and, Mark Korthuis (President and CEO, Glenrose Rehabilitation Hospital Foundation; Member, International Advisory Board, Dalhousie Centre for Global Mental Health).

Dalhousie Global Mental Health Guest Lecture Series

The **Dalhousie Global Mental Health Guest Lecture Series** is offered in collaboration with the Nova Scotia Health Innovation Hub, IWK Health, and the Office of Community Engagement, Faculty of Medicine, Dalhousie University. The lecture series invites local, national, and international global mental health experts to present current research and topical and contemporary issues related to global mental health.

The following lectures were held in the 2025/26 academic year:

Sept. 17, 2025 (presented as part of Department of Psychiatry Rounds)
Title: Psychopathology, Culture, & Society
Presenter: Dr. Femi Oyeode, Psychiatrist; Radio Host; Author, Institute of Clinical Sciences, University of Birmingham

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Nov. 28, 2025
Title: Rural and Remote Psychiatry: How Canadian and Rwandan Psychiatry may have Global Reach and Relevance
Presenter: Dr. Jack Haggarty, Psychiatrist; Professor and Former Chair of Psychiatry, NOSM University; and, Certified Physician Executive

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Jan. 16, 2026
Title: Community-Led Indigenous Mental Health and Addiction Research
Presenter: Dr. Christopher Mushquash, researcher, clinician, and First Nation scholar

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March 25, 2026 (presented as part of Department of Psychiatry Rounds)
Title: The intersection of psychotherapeutic work and the cultural axis
Presenter: Dr. Jaswant Guzder, Clinical Professor, University of British Columbia (psychiatry); Co-Director UBC Social and Cultural Psychiatry Program; and Adjunct Professor (psychology) University of Victoria

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May 29, 2026
Title: The Exploration, Preparation, Implementation, Sustainment (EPIS) Framework and Applications in Global Mental Health Research
Presenter: Dr. Gregory Aarons, Clinical and Organizational Psychologist and Professor of Psychiatry at UC San Diego

Dalhousie Special Interest Forum for Global Mental Health and Leadership Development

The Dalhousie Special Interest Forum for Global Mental Health and Leadership Development is focused on training and preparing faculty, medical residents, fellows, and graduate students to become Global Mental Health Practitioners and Leaders, supporting the development, implementation, monitoring and evaluation of policies and programs that expand access, improve the quality of mental health care, and address mental health inequities.

The 2025/26 schedule featured the following student-led presentations on aspects of the World Health Organization's (WHO) guidance on mental health policy and strategic action plans.

Oct. 10, 2025 (World Mental Health Day)

Topic: WHO's Mental Health Atlas 2024

Presenters: Medard Adu and Bala Harri

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Oct. 31, 2025

Topic: WHO's Guidance on mental health policy and strategic action plans: Module 2 (Part 1 of 2). Key reform areas, directives, strategies, and actions for mental health policy and strategic action plans

Presenters: Samuel Nkrumah and Daniel Basso

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Nov. 21, 2025

Topic: WHO's Guidance on mental health policy and strategic action plans: Module 2 (Part 2 of 2). Key reform areas, directives, strategies, and actions for mental health policy and strategic action plans

Presenters: Bala Harri and Nikki Mattocks

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Jan. 30, 2026

Topic: WHO's Guidance on mental health policy and strategic action plans: Module 3 (Part 1 of 2). Process for developing and implementing mental health policy and strategic action plans

Presenters: Somtoo Henry and Samuel Obeng-Nkrumah

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Feb. 27, 2026

Topic: WHO's Guidance on mental health policy and strategic action plans, Module 3 (Part 2 of 2). Process for evaluating mental health policy and strategic action plans

Presenters: Daniel Basso and Damilola Onietan

COMING UP IN 2026/27

The Special Interest Forum for 2026/27 will explore how mental health and well-being can be promoted across government and public policy sectors.

Guided by the World Health Organization's 2025 framework, the series will examine opportunities for coordinated action in areas such as health, education, employment, justice, social protection, culture and recreation, climate and the environment, and urban and rural development.

Sessions will be presented by postgraduate students and psychiatry residents, integrating practical examples from Canada and diverse international contexts to connect global guidance with policy, research, and practice.

11th Annual Nigeria Implementation Science Alliance (NISA) Scientific Conference

Dr. Ejemai Eboime served as Co-Chair of the Scientific Program Committee for the **11th Annual Nigeria Implementation Science Alliance (NISA) Scientific Conference**, which took place September 2–4, 2026, in Abuja, Nigeria. NISA is a multi-institutional alliance that brings together researchers, policymakers, health practitioners, implementing organizations, and development partners to advance implementation science, strengthen health systems, and accelerate the translation of evidence into practice.

As Co-Chair, Dr. Eboime's role included leading the development of the scientific programme, designing and coordinating sessions, engaging speakers and partners, and helping ensure that the conference facilitates meaningful exchange between research, policy, and real-world implementation.

This year's conference was themed **“From Evidence to Impact: Advancing Implementation Science for Sustainable Development.”** The scientific programme addressed major health-system priorities, including mental and behavioural health, universal health coverage, digital health and artificial intelligence, translating national policies into front-line care, sustainable global health partnerships, and strengthening implementation science capacity in Africa. A dedicated mental and behavioural health session, **“Closing the Mental Health Treatment Gap in Africa: What Has Actually Worked?”** examined practical and scalable approaches to improving access to mental healthcare across African settings.

The conference also provided an opportunity to advance the centre's international partnerships. During his time in Nigeria, Dr. Eboime will be meeting with colleagues from the IVAN Research Institute about the MOU being developed between IVAN and the Dalhousie Centre for Global Mental Health. The proposed partnership is intended to facilitate collaborative research, teaching, capacity strengthening, and knowledge exchange between the two institutions.



Dr. Eboime at the 11th Nigerian Implementation Science Conference in Abuja. The conference brought together researchers, practitioners, and leaders to advance implementation science in Nigeria and across Africa.



Dr. Eboime presents the Best Undergraduate Student Abstract Award to Amir Yahaya. The award recognized an outstanding contribution by an emerging researcher at the conference.



Dr. Eboime contributes to a panel discussion on universal health coverage in Nigeria. He shared practical lessons and best practices for advancing equitable access to health services.



Dr. Eboime moderates a session on the future of implementation science in Africa. The discussion brought together leaders of implementation science organizations to consider priorities and opportunities for the field.

PROGRAMS

MASTER OF CLINICAL PSYCHIATRY AND GLOBAL MENTAL HEALTH

New Dal master's program responds to global need for better mental health-care access

A new online, course-based program from Dalhousie offers licensed health-care professionals around the world a flexible option for expanding the skills they need to provide better care for patients with mental health concerns.

The **Master of Clinical Psychiatry and Global Mental Health**, a two-year, part-time program launching in fall 2026, will enable care providers the opportunity to enhance their clinical psychiatry skills without ever having to leave the communities they serve.

"Globally, one billion people are affected by mental health conditions, yet there's a profound shortage of trained mental health professionals, particularly in low- and middle-income countries," says Dr. Ejemai Eboime, the program's director.

Dr. Eboime says the program will empower health-care providers already embedded in communities — such as family doctors, nurse practitioners, and clinical nurses — to deliver high-quality mental health care. The program centres around graduate-level training in transcultural evidence-based diagnosis, treatment planning, and psychopharmacology. And because it is delivered fully online with no thesis requirement, it offers flexibility for learners whatever their circumstances.

"Whether you're a licensed health-care professional from rural Nova Scotia, the Caribbean, or Africa, this program can help you make a difference in your community's mental health," says Dr. Vincent Agyapong, head of the Department of Psychiatry for Dalhousie and Nova Scotia Health's Central Zone. "We can start closing some of these treatment gaps so access to mental health care doesn't remain out of reach for these communities in Nova Scotia, elsewhere in Canada, or globally."

Centering clinical excellence, cultures, and communities

Developing the program was a collaborative journey. It began as a diploma concept in 2022 and evolved into a master's program based on feedback from extensive consultations with stakeholders such as family physicians in West Africa and nurse practitioners in Nova Scotia.

"What emerged was a clear and urgent need: practicing clinicians need upskilled psychiatric training that doesn't require them to leave their communities or abandon their patients," says Dr. Eboime.

The program integrates clinical excellence with cross-cultural and person-centered approaches, preparing health workers to lead in diverse mental-health settings around the world.

"The program centers people by placing patients, learners, and communities at the heart of the curriculum," says Dr. Margaret (Leigh) Meldrum, the program's associate director. "We've intentionally created a space where clinical excellence, reflection, and global perspective coexist."

There will be weekly sessions offered in real time (synchronous) as well as a self-study component at learners' own pace and time (asynchronous).

A culturally-responsive curriculum

One of the complexities of developing a program applicable to global learners is meeting the needs of different health-care contexts. Not all countries use the same tools to diagnose mental health conditions, for example.

As it prepares graduates to deliver evidence-based care in vastly different health-care contexts, a diverse faculty team has been working to create a culturally-responsive curriculum that integrates both DSM-5 (The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition) and ICD-11 (International Classification of Diseases, 11th Revision) frameworks, honours Indigenous and non-Western healing traditions, and includes decolonized approaches to mental health education by allowing space for diverse healing traditions to inform evidence-based practice.

“Mental health challenges don’t exist in isolation — they’re shaped by culture, history, systems, and access to care,” says Dr. Meldrum. “This program was designed to help clinicians think beyond diagnostic checklists and develop the skills needed to deliver thoughtful, ethical, and culturally-responsive care in diverse settings, both locally and globally.”

The Department of Psychiatry has committed to fund a limited number of scholarships, ensuring communities most affected by mental health workforce shortages can access this training, says Dr. Eboime.

The ripple effect

Empowering health-care providers in their communities and investing in their education benefits individual patients and entire health systems.

“This program creates a ripple effect,” says Dr. Eboime. “When a family physician in northern Nigeria or rural Nova Scotia completes this program, they return to their practice with enhanced skills in psychiatric assessment, culturally-adapted treatment planning, and evidence-based psychopharmacology. That means better care for their patients, reduced unnecessary referrals to overburdened specialist services, and improved capacity to manage complex mental health presentations.”

Graduates also return as leaders on their teams, in quality improvement initiatives, and in integrating research evidence into practice, adds Dr. Eboime.

“Globally, we’re building a network of practitioners who can lead mental health initiatives in their communities while contributing to the global knowledge base through culturally-grounded research and innovation.”

The Master of Clinical Psychiatry and Global Mental Health is welcoming its first cohort in September 2026.

The Master of Clinical Psychiatry and Global Mental Health is designed for eligible healthcare professionals who already hold an active license to practice clinically in their jurisdiction and does not qualify graduates for professional licensing.

Learn more at
dal.ca/clinical-psychiatry-global

“When a family physician in northern Nigeria or rural Nova Scotia completes this program, they return to their practice with enhanced skills in psychiatric assessment, culturally-adapted treatment planning, and evidence-based psychopharmacology. That means better care for their patients, reduced unnecessary referrals to overburdened specialist services, and improved capacity to manage complex mental health presentations.”

— Dr. Ejemai Eboime, Program Director

From Cape Breton to Jamaica to Lagos.

Master of Clinical Psychiatry and Global Mental Health

**Study online,
deliver on-site.**



International Fellowship Program

In 2025/26 six International Fellows completed fellowship training. The fellowships were completed in Neuropsychiatry and Psychiatry of Intellectual and Developmental Disability, Forensic Psychiatry, Sleep Medicine, Child and Adolescent Psychiatry, and Early Psychosis Intervention.

The diversity of fellowship areas reflects a strong alignment with evolving clinical priorities and workforce needs. While all completed and current training has been based in Halifax, the program is expanding into New Brunswick with upcoming placements.

The program continues to attract strong international interest, with over 30 applications received since May 2025.

To complement its clinical training mandate, the program has strengthened its academic programming by introducing two seminar series: a transdiagnostic clinical seminar series and a research focused series, both designed to enhance fellows' competencies in clinical reasoning, systems thinking, ethics, and applied research.

The **International Fellowship Monthly Seminar Series** provides International Fellows in Dalhousie University's Department of Psychiatry with focused learning across key areas of contemporary mental health practice. Delivered through monthly one-hour virtual sessions, the series explores topics including mental health ethics,

person-centred care, psychosocial rehabilitation, social determinants of mental health, transcultural psychiatry, collaborative care, biopsychosocial formulation, psychopharmacology, mental health informatics, and administrative psychiatry. Readings and expert-led discussions support participants in applying these perspectives within diverse clinical and cultural contexts.

The **International Fellowship Research Seminar Series** supports research capacity among International Fellows in Dalhousie University's Department of Psychiatry. Through monthly virtual sessions, participants develop practical skills in research design, qualitative and quantitative methods, evidence reviews, data analysis, knowledge sharing, academic publishing, and grant writing. The series aims to equip fellows to undertake contextually relevant mental health research and apply these skills within their home countries and communities.



RESEARCH

STAKEHOLDERS ADVISORY GROUP MEETING

Building Resilience through Inclusive Development and Gender-responsive Life Skills Education for Internally Displaced Adolescents in Nigeria (BRIDGE-IDAs)

Dr. Ejemai Eboreime attended the Stakeholders Advisory Group Meeting for the Building Resilience through Inclusive Development and Gender-responsive Life Skills Education for Internally Displaced Adolescents in Nigeria (BRIDGE-IDAs) project in Abuja , Nigeria in March 2026.

[Learn more about the project.](#)



GRANT:

Culturally-Adapted Artificial Intelligence for Mental Health Support in Forcibly Displaced Communities

Principal investigator: Dr. Ejemai Eboreime “Culturally-Adapted Artificial Intelligence for Mental Health Support in Forcibly Displaced Communities.” Co-principal investigator: Orji, Rita; Co-applicants: Okpani, Arnold; Liebenberg, Linda; Obi-Jeff, Chisom; Mbakogu, Ifeyinwa; Agyapong, Vincent; IdemiliAronu, Ngozi; Government of Canada’s New Frontiers in Research Fund (NFRF).

30

**Global Mental Health
publications in the past year.**

INTERNATIONAL OPPORTUNITIES:

Sleepwell's research and knowledge mobilization

Sleepwell, a research and knowledge mobilization program led by Drs. David Gardner and Andrea Murphy, continues to expand its reach across Canada and internationally. Following publication of the YAWNS NB study, which demonstrated that Sleepwell's self-guided resources can improve sleep while reducing sedative use, the program has established collaborations to translate, culturally adapt, implement, and evaluate its resources in diverse healthcare settings.

Sleepwell's first international collaboration, led by Prof. Anna Birna Almarsdóttir, brought the program to Iceland, where sedative use is among the highest in the Nordic countries. The partnership translated Sleepwell's materials, launched the Sofðuvel website, and supported a national campaign that distributed 15,000 translated booklets through primary care clinics and community pharmacies. Evaluation of the campaign is ongoing.

A second major collaboration is underway with the deprescribing research team at Nantes University in France, led by family physician Dr. Jean-Pascal Fournier. Their team is piloting a novel two-step approach that invites long-term sedative users to request Sleepwell resources before receiving a targeted mail-out. This work is informing discussions about adapting similar population-based strategies within the Canadian healthcare system, beginning in the Maritimes.

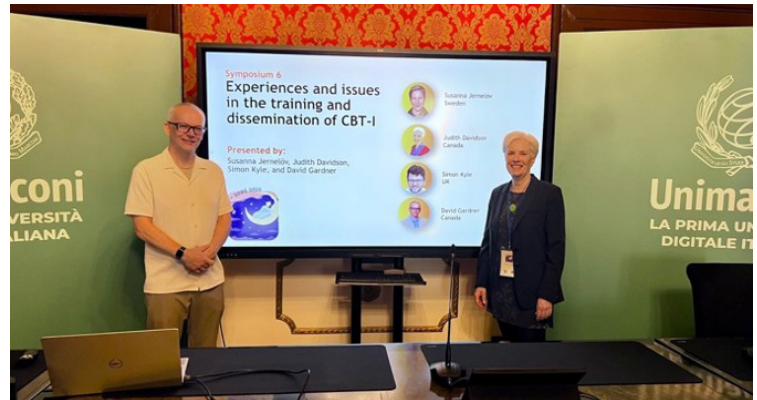
Additional partnerships are underway with research teams in Sweden and Israel, including translations of Sleepwell resources into Swedish, Hebrew, Arabic, and Russian. Sleepwell has also begun discussions with the United Kingdom's Sleepio team to explore how Sleepwell's self-guided approach to reducing sedative use could complement digital CBT-I.

Within Canada, Sleepwell continues to collaborate with researchers, clinicians, and community organizations, including the Calgary Chinese Elderly Citizens' Association, where culturally adapted group CBT-I programs have demonstrated promising early results in community settings. Plans are underway to expand the Calgary program.

Sleepwell's expanding international activities also provide valuable training and collaboration opportunities for Dalhousie students and staff. Pierre-Olivier Couture, who recently transitioned from the MSc in Psychiatry



Meeting with Icelandic health professionals, Reykjavik, August 2025.



Symposium presentation at the European Insomnia Network conference, Rome, May 2026.



Program training for members of the Calgary Chinese Elderly Citizens' Association, Calgary, October 2025.



Symposium presentation at the International Conference on Deprescribing, Montreal, April 2026.

Research program to a PhD, is leading research focused on advancing and evaluating Sleepwell's knowledge mobilization and implementation objectives. Katya Kruglova, Sleepwell's research coordinator, plays a central role in coordinating the program's research activities and international collaborations.

Sleepwell's translation and international partnerships are supported by Dalhousie University's Research and Innovation team, which assists with licensing agreements and collaborative development to ensure all adaptations remain evidence-based while being culturally relevant and accessible.



Sleepwell booth at the Canadian Sleep Society conference, Montreal, April 2025.



Discussing Pierre-Olivier Couture's MSc research at the International Conference on Deprescribing, Montreal, April 2026.

INTERNATIONAL COLLABORATIONS AND ISTDP TRAINING:

An update from Dr. Allan Abbass



Dr. Allan Abbass.

Dr. Allan Abbass is continuing several international collaborations. These include the development of an African continent training program for intensive short-term dynamic psychotherapy (ISTDP) in collaboration with University of Addis Ababa, and an ISTDP training program for psychotherapists in Denmark and Norway. He also has ongoing research collaborations with colleagues in the Netherlands, Norway, Germany, and the UK.

DELIVERING LECTURE SERIES TO THE COMMONWEALTH JUDICIAL INSTITUTE:

An update from Dr. Joseph Sadek

Dr. Joseph Sadek provided a series of mental health lectures to the Commonwealth Judicial institute.

He was invited in July 2026 by the Chief Justice of Papua New Guinea to provide several lectures to many judges from PNG, Australia and other nations around the world with the support of the United Nations.

Dr. Sadek has been appointed as a consultant for the Commonwealth Judiciary.



PARTNERSHIPS

INTER-MEDICAL SCHOOL PUBLIC SPEAKING COMPETITION

Winners Complete Elective at St. Patrick's University Hospital

Adapted and summarized from the students' report on their experience.

Winners of the 10th and 11th Inter-Medical School Public Speaking Competition claimed their prize this summer as they completed clinical electives at St. Patrick's University Hospital in Dublin, Ireland. The electives were organized by a partnership between the Ghana Mental Health Authority, St. Patrick's Mental Health Services, Dalhousie's Centre for Global Mental Health, the Psychological eHealth Foundation and the Ghana College of Physicians and Surgeons. The elective was fully funded by St. Patrick's Mental Health Services, while the Dalhousie Department of Psychiatry contributed to organizing the competition in Ghana and to coordinating the competition and the elective placements.

The elective was the award for winning the competition, an annual medical student debate in psychiatry. The competition was proposed and initially organized by Dr. Agyapong in 2010 to increase interest in psychiatry among medical students. The seven medical schools in Ghana send a team of two debaters to offer policy solutions to topical mental health-themed issues.

The two winning teams from the 10th and 11th competition, medical students Yaa Amponsah Nsiah, Margaret Bawa, Eugenia Elikem Lawoe, and Autis Mbaayur Ngoga, travelled to Dublin, Ireland and completed their elective from June 22 to July 17, 2026. Over the month, the students completed rotations in young adult psychiatry, later life psychiatry, general adult psychiatry, addiction psychiatry, and the special care unit.

Each rotation provided the opportunity to learn and reflect on a specific area of practice and its application to their future clinical practice. The students were grateful to learn from the team consultant at each rotation, their teams, and were thankful for the time spent with them and the warm welcome they received.

During their young adult psychiatry rotation, one of the experiences the students reported on was gaining insight into how Attention-Deficit/Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder (ASD) affected individuals and their families. This was beneficial because neurodivergence is an area left largely unexplored in Ghana. The young adult psychiatry team also shared how they navigate the care of different individuals against the backdrop of family dysfunction, neurodivergence, and questioning identity and sexuality. The students reported that this brought their attention to some of the gaps back home and how these omissions negatively affect patient care.

During the later life psychiatry rotation, the students observed the use of telemedicine to ensure older adults received continuity of care despite mobility issues or other barriers to travel. Additionally, emphasis on interpersonal practices, patient autonomy and shared decision-making, and innovative service delivery, were key takeaways. The students also had the opportunity to observe Electroconvulsive Therapy (ECT) for the first time, under supervision, broadening their understanding of this treatment. They reported this rotation will undoubtedly influence their future clinical practice and strengthen their commitment to providing dignified, patient-centred care for older adults within their own healthcare systems.

They reported their placement in general adult psychiatry provided them with a new appreciation for compassionate, recovery-oriented, and multidisciplinary care. The rotation was inspiring to them to return to Ghana to make a meaningful difference and will shape the way they will practice medicine and advocate for mental health throughout their careers.

Similarly, through their rotation in addiction psychiatry, the students reported gaining a deeper appreciation of addiction as a complex medical condition requiring compassionate, evidence-based and multidisciplinary care. They observed that recovery is about more than abstinence; it focuses on restoring health, dignity, and quality of life.

During their rotation on the special care unit, where those experiencing acute mental illness receive care, the students reported being struck by the balance between vigilance and warmth and the interdisciplinary collaboration. For example, the students reported that each patient was assigned a dedicated social worker who takes time to educate the patient on their condition

and medication. They reported the rotation offered a valuable model of how acute psychiatric care can be delivered with structure, compassion, and genuine patient involvement, even amid high patient turnover and considerable clinical complexity.

The students' accommodations were provided by St. Patrick's Health Services at Trinity Hall which they report were comfortable and well-suited to their needs. They adjusted to the cooler climate, longer daylight hours, and unfamiliar accents, and the warmth of everyone they met made settling in easier. They were also able to spend some time outside of working hours to explore the city and do some sight-seeing.

They report being surrounded by wonderful people throughout their stay. One highlight they shared in their report was meeting with the Medical Director, Professor Paul Fearon, who generously shared his experiences as a psychiatrist, clinician, researcher, leader and father, offering valuable perspectives on the practice of psychiatry and the responsibilities of medical professionals. From the CEO and Medical

Director to consultants, nurses and other cadres of health professionals, HR staff, restaurant workers and the janitorial team, they reported being welcomed with genuine warmth and treated like family throughout their stay.

As part of their commitment to continuous improvement, the students offered a few observations and recommendations to enhance the experience of future participants.

The students report the elective exceeded their expectations and provided invaluable exposure to innovative models of psychiatric care, multidisciplinary collaboration, and patient-centred practice. They are confident the lessons learned during this elective will contribute meaningfully to improving mental healthcare delivery within their own healthcare system.

Next year's competition will be held in February 2027.

MEETING:

Collaboration with PAHO

In August 2026, collaboration discussions between Dalhousie University and PAHO (Pan American Health Organization) continued with a meeting to explore partnership opportunities under their newly-signed framework agreement. Dr. Renato Oliveira e Souza, Unit Chief for Mental Health and Substance Use at PAHO headquarters, led the discussion with Dr. Vincent Agyapong, Director of the Dalhousie Centre for Global Mental Health, and other Dalhousie faculty members. The participants reviewed potential collaboration areas including:

- Joint regional webinars on global mental health topics
- Development of study tools and training for primary care providers
- Policy briefs and technical documents
- Scientific publications
- Scholarship opportunity for Caribbean health professionals in Dalhousie's online Master of Clinical Psychiatry and Global Mental Health
- Internship opportunities for Dalhousie Department of Psychiatry graduate students and researchers

The team agreed to meet bi-monthly to maintain momentum with the collaboration.

The Centre for Global Mental Health is working toward establishing a collaborating centre with PAHO.



MEETING:

Strengthening partnerships for implementation research in Africa

The INSPIRE Lab collaborates with the International Research Centre of Excellence (IRCE) at the Institute of Human Virology Nigeria (IHV-Nigeria) on several research initiatives.

Pictured right, the INSPIRE Lab's Dr. Ejemai Eboime, assistant professor in the Department of Psychiatry, Dalhousie University, and Omolayo Anjorin during a recent visit to the IRCE—an opportunity to connect with colleagues, strengthen ongoing collaborations, and explore new opportunities for advancing implementation research and health systems impact.



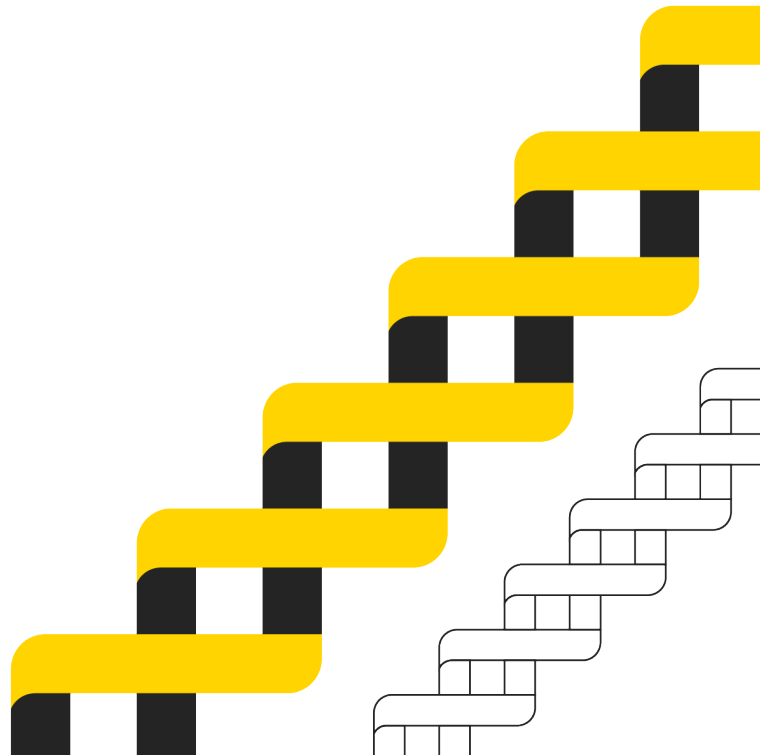
AWARDS & HONOURS

DR. BALA HARRI AWARDED CERTIFICATE OF ACHIEVEMENT:

5th World Congress on Public Health and Epidemiology

Dr. Bala Harri was awarded a Certificate of Achievement for his exceptional and noteworthy presentation “Psychosocial Realities and Displacement-Related Factors Shaping Mental Health Among Internally Displaced Persons in North Central Nigeria” at the 5th World Congress on Public Health and Epidemiology, held in Orlando, Florida, USA, from August 17–18, 2026.

Dr. Bala Harri is a PhD in Psychiatry Research student in Dalhousie's Department of Psychiatry. Congratulations Dr. Harri!





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