

Message from Leadership Team

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side the country and must apply for a Work Visa in Canada. This process can often take months to complete.

Resolving these issues has obviously taken us some additional time to sort out, and we greatly appreciate the patience everyone has shown as we stay focused on reaching our goal of filling the aforementioned 20 AMHSP positions.

Once that happens, we fully expect the AMHSP to yield significant benefits for both the Department of Psychiatry and for particular areas of AHS's Addiction and Mental Health system.

The AMHSP is expected to help AHS's Urgent Care Clinics, the Inner City Team, and the Community Outreach or Crisis Teams to develop closer linkages with Psychiatrists, improving access to community-based assessments.

For the Department of Psychiatry, the AMHSP will help us to more effectively meet the needs and enhance the teaching programs for Undergraduate Medical Education, Psychiatry Residency and Sub-specialty Training.

It is also expected to encourage Psychiatrists to become more involved in program development and Quality Improvement initiatives, while bringing more clinically-based research into the Zone's unique practice environments.

Most of the areas previously identified as high priorities for AHS and the Department of Psychiatry have matched up well with the backgrounds of the current pool of AMHSP applicants. As a result, we're confident that the mandates of both organizations will ultimately be well served by this new remuneration structure.

As we highlighted in the May-June issue of *Connections*, it's also important to note that we have received confirmation from the newly elected Government of Alberta that the AMHSP program for Alberta Psychiatrists will be continued through at least the 2020-2021 fiscal year, starting April 1, 2020.

This removes any uncertainty that may have existed about the

status of the program beyond the current year.

For both the Department of Psychiatry and AHS, the rollout of the AMHSP is a crucial next step in our joint, ongoing efforts to ensure that strong academic programs and strong clinical practices go hand-in-hand.

On a separate note, we'd like to offer our congratulations to Dr. Bo (Cloud) Cao, an Assistant Professor in the Department of Psychiatry, who was recently recognized by the New York-based Brain & Behavior Research Foundation (BBRF) for his outstanding research work.

The BBRF, which awards research grants to develop improved treatments, cures, and methods of prevention for mental illness, acknowledged Dr. Cao's important research on identifying early-stage biomarkers for Schizophrenia. At a ceremony in New York in July, Dr. Cao received a 2019 Klerman Prize Honourable Mention (For details, see story below).

Dr. Cao's study – done in collaboration with Dr. Xiang Yang Zhang, an Associate Professor in Psychiatry at the University of Texas Health Science Center in Houston, and partly funded by the BBRF's NARSAD (National Alliance for Research on Schizophrenia & Depression) Young Investigator Grant – harnessed the power of machine learning algorithms to identify patients with Schizophrenia.

Dr. Cao is hoping that his study methods and findings could be used as a step by other researchers toward achieving more accurate early-stage identification and improved treatment response predictability for previously untreated individuals with Schizophrenia.

We are delighted that Dr. Cao's research has earned such international praise, helping to raise awareness across Canada and beyond of the ground-breaking work being done by so many researchers and clinicians affiliated with the Department of Psychiatry.

Since 1987, the BBRF has awarded more than \$394 million (U.S.) to fund more than 4,700 leading scientists around the world, leading to over \$3.9 billion in additional funding.

Dr. Cao is the fourth faculty member from the University of Alberta to be honoured by the BBRF over the past 32 years. We are certain he will not be the last. **C**

Awards Spotlight:

Dr. Bo Cao Recognized by Brain & Behavior Research Foundation for Research on Identifying Early-Stage Biomarkers for Schizophrenia

Dr. Bo (Cloud) Cao, an Assistant Professor in the Department of Psychiatry at the University of Alberta, has been recognized by the New York-based Brain & Behavior Research Foundation (BBRF) for exceptional work in basic research on mental illness.

The BBRF, which awards research grants to develop improved treatments, cures, and methods of prevention for mental illness, acknowledged Dr. Cao's research on identifying early-stage biomarkers for Schiz-

ophrenia with a 2019 Klerman Prize Honourable Mention.

"Dr. Cao is developing translational tools for accurate and personalized diagnosis and treatment optimization for mental disorders – including Major Depressive Disorder, Bipolar Disorder, Schizophrenia and substance misuse," said the BBRF, in announcing the winners of its 2019 Klerman and Freedman Prizes.

The BBRF's awards, which were presented at a ceremony in New York on July

26, were created to honour the work of outstanding scientists who have been supported by the BBRF's Young Investigator Grants Program. The program provides funding for research that impacts all brain and behaviour disorders.

"The Klerman and Freedman prizes recognize innovative thinking and remarkable talent across the field of Neuropsychiatry. Recognition for scientists early in their career helps them go on to receive further

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Awards Spotlight

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funding and is a precursor to further accomplishments,” said Dr. Herbert Pardes, President of the BBRF’s Scientific Council, in presenting the awards.

“We applaud these researchers for their brilliant work, and we thank our generous donors who understand that support of brain and behavior research will continue to produce better treatment, and ultimately, cures and prevention for mental illness.”

Dr. Nolan R. Williams, an Assistant Professor at Stanford University and Director of its Brain Stimulation Lab and Interventional Psychiatry Clinical Research Department, won the 2019 Klerman Prize for Exceptional Clinical Research.

Dr. Anna Victoria Molofsky, Associate Professor, University of California at San Francisco, Department of Psychiatry and Weill Institute for Neurosciences, was the 2019 Freedman Prize winner for Exceptional Basic Research.

Dr. Cao’s study – done in collaboration with Dr. Xiang Yang Zhang, an Associate Professor in Psychiatry at the University of Texas Health Science Center in Houston, and partly funded by the BBRF’s NARSAD (National Alliance for Research on Schizophrenia & Depression) Young Investigator

Grant – harnessed the power of machine learning algorithms to identify patients with Schizophrenia.

By using machine learning algorithms to measure the connections between the brain’s superior temporal cortex and other cortical regions, Dr. Cao and his team were able to identify first-episode drug-naïve (i.e.,



Dr. Bo (Cloud) Cao

previously untreated) Schizophrenia patients with an accuracy of 78.6 per cent.

They were also able to predict which individual patient could respond to a particular antipsychotic drug, Risperidone, with 82.5 per cent accuracy.

Dr. Cao is hoping that his study methods and findings could be used as a step by other researchers toward achieving

more accurate early-stage identification and improved treatment response predictability for previously untreated individuals with Schizophrenia.

“It’s a great honour to be recognized by the Brain & Behavior Research Foundation for my work, and to be considered for this prestigious award,” says Dr. Cao. “This gives me a strong sense of encouragement to continue. This is obviously a new field for researchers like me, and we are hopeful and excited about the potential for important discoveries.”

Since 1987, the BBRF has awarded more than \$394 million (U.S.) to fund more than 4,700 leading scientists around the world, leading to over \$3.9 billion in additional funding.

The Young Investigator Grant Program enables scientists who are early in their careers to pursue innovative ideas in Neurobiological and Psychosocial research, gather pilot data and generate “proof of concept” for early detection, treatment, prevention and cures for mental illness.

The Klerman and Freedman Prizes are named for Gerald Klerman, M.D., and Daniel Freedman, M.D., Neuropsychiatry pioneers who played seminal roles as researchers, teachers, physicians and administrators. **C**

Teaching Excellence:

Dr. Omar Din Honoured by Professional Association of Residents of Alberta with 2018-2019 Clinical Teaching Award

It’s easy to see why Dr. Omar Din gets such positive reviews among Psychiatry Department Residents. He’s friendly and approachable, he laughs often and easily, he clearly loves his chosen profession, and he’s passionate about his role as a preceptor and mentor to Alberta’s next generation of Psychiatrists.

“At my core I’m like a big Resident myself. I’m like a PGY15 going on 16,” he chuckles.

“I appreciate my connection with Residents and I understand – having been a Resident not that long ago – what things Residents would probably want in an ideal rotation, and what qualities they would want from their preceptor.”

On this humid summer day, we’ve agreed to meet in the busy Psychiatric Outpatient Clinic at Edmonton’s Grey Nuns Hospital, where he has been a practicing Psychiatrist for 11 years.

A member of the Residency Program Committee and an Assis-

tant Clinical Professor in the Department of Psychiatry, Dr. Din was recently honoured with the 2018-2019 Clinical Teaching Award by the Professional Association of Residents of Alberta (PARA).

The award recognizes a Physician preceptor in the City of Edmonton who has shown excellence in Resident education.

“I’d like to thank the Residents for nominating me for this great honour,” he says. “I really appreciate having had this opportunity to teach Residents and mentor them over the years. I love teaching and sincerely appreciate being recognized for my efforts.”

For Dr. Din, it seems, teaching is more than a professional obligation. It’s a passion and part of a long family tradition.

“I come from a family of teachers. My mother was an Educational Psychologist, my father was a University Professor of Mechanical Engineering, and my sister is a teacher,” says Dr. Din, who

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Teaching Excellence

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grew up in Fort McMurray and moved to Edmonton in the mid-1990s to attend the University of Alberta.

“My wife, Dr. Afshan Ghani, is an active and involved preceptor as well. She’s an Assistant Clinical Professor in General Internal Medicine at the U of A and she practices at University of Alberta Hospital, so we’re both pretty involved in Residents’ education,” he notes.

“It’s an important part of our lives and I look up to her in terms of motivating me and helping me to provide the best educational experience I can for Residents.”

So how would Dr. Din describe the qualities of a great teacher and mentor? It’s a question that elicits a long, thoughtful response.

“I try to think about the things I was blessed with over the years, having wonderful people teach me in a certain way. Then I try to adopt those qualities in terms of how I approach teaching Residents now, whether they are junior Residents or senior Residents preparing to transition into practice,” he says.

“Those qualities include being enthusiastic and understanding, and taking your time with teaching. It means being very focal in the things you want to get across for learners to grasp. It also means having a collegial environment, having a good sense of humour and working well together as a team. I treat Residents as colleagues, so I don’t view it as a hierarchical relationship with them. Over the years I’ve found that to be a very powerful thing,” he adds.

“I’ve also been fortunate to work with many Residents over the years who are incredibly talented people, so it’s really a two-way relationship. I learn from them as well, and they’ve pushed me to be a better teacher and preceptor.”

When asked who he regards as his own biggest influencers over the years, he promptly rattles off a list of current and past faculty members from the Department of Psychiatry.

They include Dr. Andrei Poukhovski, an Assistant Clinical Professor; Dr. Ron Oswald, Associate Clinical Professor; Dr. Atul Khullar, Associate Clinical Professor; Dr. Lorne Warneke, Clinical Professor; Dr. Daniel Li, an Assistant Clinical Professor; and Dr. Klaus Gendemann, Clinical Professor.

“Dr. Daniel Li I would say was a huge influence. I worked with him a fair bit in my own training. He’s now the program Chair with

Alberta Health Services (as Interim Zone Clinical Department Head – Addiction and Mental Health). He’s such a wonderful person and he has such a kind manner with patients and with people in general. I really looked up to him in terms of how he dealt with and approached learners, staff and patients,” he says.

“Dr. Poukhovski is also a great ambassador for Psychiatry and he was a mentor for me early in my career. In fact, while I was in medical school, I worked with a number of people at Alberta Hospital Edmonton and they were very kind and collegial. It was a great working environment.”

Looking back, he says, that’s where his passion for Psychiatry was born.

“In medical school they had this rotation called a Psychiatric Externship at Alberta Hospital Edmonton. Medical students could do this elective rotation. I was in Acute Care Psychiatry there, working on a secure unit with Dr. Poukhovski and I just loved the work. It was different every day, and I got exposure to some fascinating clinical cases. I knew from that moment that this is what I wanted to do with my career.”

At Grey Nuns Hospital, where he is the Department of Psychiatry’s Resident Coordinator, Dr. Din is one of 18 staff Psychiatrists who oversee a large inpatient population that includes 70 beds in three separate units, including a 10-bed secure unit. That makes it one of the largest inpatient hospital sites in the city.

“It’s a wonderful collegial environment here and I have some great col-

leagues. It feels like a family and everyone gets along very well. We look out for each other and provide good advice to one other when needed. It’s been a wonderful place to work and I feel very fortunate to be here.”

Now that he has reached the ripe old age of 40, what are Dr. Din’s future career aspirations?

“Well, as you can see, I’m pretty invested in teaching. I love teaching, I love being involved with Residents’ education, and I’ll continue in my role as Psychiatry Coordinator for Residents here at Grey Nuns. I’ll also continue working with the Residency Program Committee, and advocating for Residents,” he says.

“I would also like to get involved with some Royal College (Royal College of Physicians and Surgeons of Canada) related educational activities in the future – perhaps becoming a Royal College examiner, if such an opportunity arose.” **C**



Dr. Omar Din

Organizational Reboot:

With Funding Secured and a New Executive Director in Place, Alberta Alliance on Mental Illness & Mental Health Charts New Course

After securing a new three-year funding agreement and installing Lee Hall as its new Executive Director, the revitalized Alberta Alliance on Mental Illness & Mental Health (AAMIMH) is pushing ahead with plans to broaden its membership and expand its reach province-wide.

“The past year has been an exciting year of rebuilding and refocusing for the Alliance. With the new grant secured we were able to stabilize our staffing and deepen our relationships with key partners. Now we’re focused on transforming the Alliance into a truly province-wide organization,” says Hall, who previously served as the AAMIMH’s Interim Executive Director.

“Although the Alliance has traditionally been more Edmonton-focused, that’s already changing. At our recent Annual General Meeting we elected a new executive slate, and we now have some great people from Red Deer and Calgary in key senior roles. We also revised our membership by-laws to broaden the scope of who is eligible to be a member, so we can capitalize on the expertise that exists across the province.”

Dr. Judi Malone, the AAMIMH’s President, laid out the key elements of the organization’s strategic plan at its Aug. 19th Annual General Meeting.

“Our focus is to effect change in Alberta’s addiction and mental health system through active participation and effective collaboration with our partners. Our strategic priorities are to pursue advocacy through engagement; broaden our collaboration and consultation; develop a more comprehensive communication strategy; and achieve organizational excellence,” she says.

“The Alliance also intends to develop a broader provincial perspective on important issues in order to strengthen our advocacy role. As part of that, we will ensure that client and family perspectives are not only expressed but heard and understood, so our political representatives and partner organi-

zations are better informed and aware of their mental health concerns.”

Hall, who previously worked as a surveyor and educator for nearly two decades with Accreditation Canada, overseeing large and small-scale evaluations of health systems, public and mental health services and community organizations, says the Alliance



Lee Hall

is also working on plans for an inaugural family-focused conference on mental health.

“We’re working closely with FAMI-Alberta and the University of Alberta to pull together a conference this spring, so we’re really excited about that. We haven’t decided on a venue for it yet but this first conference will be in Edmonton. We’re hoping it will become an annual event with a provincial focus.”

FAMI-Alberta (Families supporting Adults with Mental Illness in Alberta) is a grassroots group that supports family members who are dealing with serious mental health conditions, such as Schizophrenia and Bipolar Disorder.

“We’re also participating in the CMHA

(Canadian Mental Health Association) Conference later this year. We’re not going to be a presenter but we will be an exhibitor, so that’s really a big opportunity for the Alliance to put its new face forward as a revitalized, more effective organization.”

As its new partnership with FAMI-Alberta indicates, a major component of the Alliance’s agenda is on giving families and those with lived experience a bigger voice in advocating for policy and mental health service improvements.

With that in mind, Hall says the organization has been working in recent months on creating a new Voices strategy, giving family members and those with lived experience a more formal platform for sharing their experiences, insights and recommendations. An upcoming retreat for AAMIMH members, planned for early December, will focus on how to effectively integrate those ideas and insights into the Alliance’s operational planning.

Meanwhile, the Alliance has strengthened its partnership with CASA Child, Adolescent and Family Mental Health, serving as a co-sponsor of CASA’s Dr. Roger Bland Lecture Series on Improving Child and Youth Mental Health, and helping CASA select a strong lineup of presenters for the free public events.

“This is an amazing educational series for both the public and for mental health care providers. With CASA and other partners, the Alliance is also involved with the recruitment and selection of a Research Chair for the province,” she says.

“The Alliance has also reached out to Alberta Health Services and is actively involved in the Strategic Clinical Network for Mental Health and Addictions, and we also sit on the Provincial Research Hub. We were excited to be asked to contribute to the Key Performance Indicators project with AHS as they develop measurements to en-

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Organizational Reboot

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sure effective service and support.”

The Alliance has also worked closely with the Department of Psychiatry on a variety of initiatives, including this latest in a series of articles in the *Connections* newsletter, aimed at updating readers on the AAMIMH’s activities and future plans.

“The opportunity to partner in the

newsletter provides a broader reach and exposure for the Alliance as we continue to build our awareness and provincial linkages,” says Hall. The Alliance is also working with a communications consulting firm on developing informational materials and a new website.

“In summary, the past year has laid the groundwork for the exciting work that lies ahead. Strengthening partnerships – both

with our current members and by building new relationships – will only further enhance our ability to advocate for effective and responsive mental health services and support for Albertans.”

“Our strength is in our ability to work together as members, reaching out to those with lived experiences. We will work to ensure our system reflects best practice and is responsive to the needs of all Albertans.” **C**

Research Focus:

Psychiatry Graduate Student Reham Shalaby Launches Study of Innovative AHS Peer Support Program

The effectiveness of a novel four-year-old Alberta Health Services (AHS) program to support those struggling with addictions and mental health issues is the subject of a new study by a student in the Department of Psychiatry’s Graduate Program.

The study – “Enhancing peer support experience for patients discharged from acute psychiatric care: A randomized controlled pilot trial” – is being conducted by Master’s student Reham Shalaby.

Dr. Rabab Abou-ElMagd Ahmed, Adjunct Clinical Professor in Psychiatry, is the research coordinator. Dr. Vincent Agyapong, Clinical Professor and Director, Residents Quality Improvement Projects, Department of Psychiatry, and AHS Edmonton Zone Clinical Section Chief, Community Mental Health, is supervising the project.

Shalaby’s study is focused on evaluating the effectiveness of AHS’s Peer Support Program, which currently employs 26 Peer Support Workers in the Edmonton Zone. The program was launched in 2015 by AHS Addiction and Mental Health, Edmonton Zone, and is currently managed by Michelle Knox, AHS Program Manager for Housing and Recovery Supports.

Peer Support Workers, who are embedded in multidisciplinary teams at clinics and AHS programs throughout the city, harness the

knowledge and insights gleaned from their own lived experience in overcoming addictions and mental health challenges to support clients who are struggling with similar issues of their own. (See accompanying story for more background on the Peer Support Program).

Shalaby hopes to enroll a total of 180 patients who have been discharged from Acute Psychiatric Care units at local hospitals and

as many as 25 Peer Support Workers in the randomized controlled trial by the beginning of 2020.

“We began the recruitment several weeks ago from all of the Edmonton Acute Care Psychiatric units at local hospitals, including Grey Nuns Hospital, Misericordia, the Royal Alexandra Hospital, Alberta Hospital and University of Alberta Hospital. We’re now up to about 52 patients and six Peer Support Workers who have agreed to work with us,” she says.

“The enrollment process will continue over a six-month period. It started in June and is supposed to end by the beginning of 2020. We are targeting 180 patients, and if we don’t reach this target by the new year, we might consider extending the enrollment period.”

If all goes according to plan, the study should be completed by early 2021.

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Masters Student Reham Shalaby (left) and Dr. Rabab Abou-ElMagd Ahmed

Research Focus

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The goal of the study is to determine whether participants who have access to both Peer Support Workers – including up to eight visits over a six-month period – as well as daily supportive text messages over the same six-month period, achieve superior overall health outcomes compared to other subgroups in the study.

The three other subgroups in the study are comprised of those who receive only one of the above-mentioned sources of support – either access to Peer Support Workers or regular supportive text messages, also over a specified six-month period – and finally, a control group that simply receives conventional, treatment-as-usual follow-up care.

“We will allocate the patients into these four main groups according to randomization tables, which ensures a fair opportunity for each participant to be in any of the four assigned groups,” she explains.

The text messages will be organized under eight separate categories, targeting individual patients according to their specific conditions and preferences.

“For example, if a patient has Depression we’ll link him or her to text messages for Depression. If they are diagnosed with Schizophrenia we’ll link them to messages for Psychotic disorders. For patients who have multiple conditions or co-morbidities, we’ll ask them about their preferences and to identify the most distressing condition for them.”

Patients in each group will subsequently complete evaluation measures (in terms of recovery, general symptomatology and functional outcomes) at five intervals, including at baseline, six weeks, 12 weeks, six months and at 12 months.

Health service utilization data as well as clinician-rated meas-

ures will also be used to assess the progress of patients. The resulting data gathered from patients will be analyzed with descriptive and inferential statistics, repeated measures and correlational analyses. The experience of Peer Support Workers will be captured through focus groups and subsequent qualitative assessments.

“For patients who receive Peer Support Worker services plus text messages, our hypothesis is that they will demonstrate best results on the different scales, including psychiatric as well as physical parameters, such as BMI (Body Mass Index) and blood glucose levels,” Shalaby says.

“For the Peer Support Workers, we also believe that they will do better and their overall health condition will improve. This will be captured through diverse follow-up measurements.”

Evidence suggests there are high attrition rates among Peer Support Workers. A lack of formalized training opportunities, and inadequate incentives for these workers to continue in their roles at various sites may be among the reasons for it. Shalaby says she hopes her study will provide additional evidence needed to address these issues.

Prior to enrolling in the Graduate Program in the Department of Psychiatry, Shalaby completed medical school at Alexandria University in Egypt and worked as a public health Physician in Egypt and Kuwait. She was subsequently appointed to various management positions at Alexandria University Hospitals.

“My passion for Neuropsychiatry led me to do some training in this field in Egypt, which enriched my knowledge and practice in this specialty. Regarding Canadian medical exams, I have passed most of them and I’m fully hopeful to pursue a Residency position at the University of Alberta, and to practice as an independent Physician in this lovely province.” **C**

Valuing Lived Experience:

AHS’s Peer Support Workers Are Breaking New Ground in Addictions and Mental Health Care

Pamela Spurvey isn’t a Psychiatrist, a Psychologist or Neuroscientist, but she is a pioneer in the field of addictions and mental health.

In 2015, Spurvey was hired by Alberta Health Services (AHS) as the very first Peer Support Worker in the Edmonton Zone.

By harnessing the knowledge, insights and empathy she gained from her own past struggles with addictions and mental health, Spurvey now applies her skills on a full-time basis supporting others who are battling similar demons of their own.

“Pam was the very first Peer Support Worker hired as an employee of AHS, and

we now have 26 such workers, most of them working full-time, in the Edmonton Zone,” says Michelle Knox, AHS Program Manager for Housing and Recovery Supports.

The effectiveness of the Peer Support Worker program is now the subject of a study by Dr. Rabab Ahmed, Adjunct Clinical Professor in the Department of Psychiatry, and Reham Shalaby, a Master’s student in the Department of Psychiatry’s Graduate Program (see separate story).

The study – “Enhancing peer support experience for patients discharged from acute psychiatric care: A randomized con-

trolled pilot trial” – is being conducted under the supervision of Dr. Vincent Agyapong, Clinical Professor and Director, Residents Quality Improvement Projects, Department of Psychiatry, and AHS Edmonton Zone Clinical Section Chief, Community Mental Health.

“AHS felt it was very important to have Pam’s voice and those of other Peer Support Workers integrated on our teams, and we now have Peer Support Workers on our Housing Outreach Teams, our Recovery Support Teams, our Assertive Community Treatment Teams, and on our Inner City

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Valuing Lived Experience

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Teams,” Knox explains.

Spurvey is currently part of the iOAT (Injectible Opioid Agonist Treatment) Team, which works out of AHS’s Forensic Assessment & Community Services (FACS) office on 106 Street.

The recently opened Addiction & Mental Health Access 24/7 site at Anderson Hall, adjacent to the Royal Alexandra Hospital, and AHS’s Young Adult Treatment Program also include Peer Support Workers. The Acute Inpatient Psychiatry Units at local hospitals are among the few places within AHS Addiction and Mental Health where Peer Support Workers don’t yet play a role.

The day-to-day tasks that Peer Support Workers perform vary widely, ranging from budgeting assistance to shepherding clients to medical appointments and support programs to assisting them with housing and basic transportation. Sometimes it’s as simple as going for a walk or a coffee, and lending a sympathetic ear to a client in crisis.

“It’s about supporting people and reconnecting them in life. Many homeless people don’t have any I.D. and haven’t been housed for a long time, so we use our lived experience to create trust and hope. We provide a bridge into the system and into various programs,” says Spurvey, who was recently certified as a qualified Peer Support Worker by Peer Support Canada.

“I remember when I was accessing the system how disconnected services could be, and how difficult it was navigating alone while I was struggling with my own mental health and addictions issues. Now we have Peer Support Workers walking alongside people in need, helping them to navigate the system, easing their sense of anxiety and creating friendship. That’s a huge plus.”

One of her clients hadn’t visited a dentist

in 10 years, says Spurvey. Since he felt paralyzed and unable to overcome his fear of going, she went with him until he was able to visit the dentist on his own.

“It’s also about socialization. I’m Indigenous, so helping people reconnect with their culture by smudging or going to ceremonies is really important as well. I took someone to pow wow recently at Poundmaker’s Lodge



Pamela Spurvey (left) and Melissa Knox

in St. Albert, and he was overwhelmed. He said ‘Thanks so much for taking me, it feels wonderful just to hear the drums again.’ So

it’s about helping people rediscover their own resiliency and empowering them.”

Since Peer Support Workers are embedded in multi-disciplinary teams, they work alongside a variety of mental health professionals, including Occupational Therapists, Social Workers, Psychologists and Recreational Therapists. “They value our opinions as part of the client’s care plan, so we’re now fully integrated into the decision-making process,” says Spurvey.

The amount and duration of contact Peer Support Workers have with clients also varies widely. If they’re part of a housing team at a community shelter, they may see their clients daily. In other situations, contact may only be once or twice a month.

So, now that the Peer Support Workers program is well established, where does AHS plan to take it from here?

“Well, we’ve talked about having an inpatient presence on our Acute Psychiatric Units, where there are no Peer Support Workers now. To me that makes sense. I’d also like to have a casual pool developed so we can start providing some training early on,” says Knox.

“We’re also really excited about the study that has been undertaken by Dr. Ahmed and Reham Shelaby from the Depart-

ment of Psychiatry. We’re hoping it will demonstrate the need and the benefits of having Peer Support Workers.” **C**

Correction

The May-June issue of *Connections* included a story on the new EMDR (Eye Movement Desensitization and Reprocessing) Pilot Program at Alberta Hospital Edmonton

Dr. Lisa Burbach, Consultant Psychiatrist, Young Adult Services at AHE and an Assistant Clinical Professor in the Department of Psychiatry at the University of Alberta, launched the project in February in partnership with Alberta Health Services, Young Adult Services and AHE

Although the story indicated this was the first inpatient EMDR program in the Edmonton Zone, this is incorrect. Some inpatient EMDR was performed in the Zone before the AHE Pilot Program was launched.

Dr. Kathy Collinson, a Clinical Professor in the Department of Psychiatry, has used EMDR treatments in her consultation liaison practice at the University of Alberta.

In addition, Dr. Diana Meakins, a Clinical Lecturer in the Department of Psychiatry, and Dr. Mary Cummins, Assistant Clinical Professor in the Department of Psychiatry, collaborated to offer EMDR therapy to inpatients at University of Alberta Hospital, starting in 2017.

We wish to acknowledge the use of EMDR by these physicians and apologize for the error. **C**

Psychiatry Resident Profile:

Second-Year Resident Dr. Dmitriy Matveychuk's Journey to the Department of Psychiatry Began in Kyiv, Ukraine

He was just eight years old when he and his mother moved to Edmonton from Kyiv, the historic Ukrainian capital, in the mid-1990s.

It was a bold decision. Psychiatry Resident Dr. Dmitriy Matveychuk says they knew absolutely no one in Alberta's frigid, far-off capital.

His mother had enrolled in an exchange program, and once they settled here they decided to remain in Edmonton.

"It was a tough adjustment. I didn't really speak any English so it took me a while to figure things out," says Dr. Matveychuk, now age 31 and starting his second year of Residency with the Department of Psychiatry.

Adapting to Edmonton's fierce winter weather was another challenge.

"It gets cold where I'm from in Ukraine, but it only gets down to minus 10 Celsius or so in the winter. There is snow but you don't get minus 30 temperatures like we have here."

After completing grade 12 at Jasper Place School, he enrolled in a science program at the University of Alberta. He excelled academically, and in 2015 he completed a PhD in Psychopharmacology in the Department of Psychiatry's Graduate Program.

"I always had an interest in the biology of psychiatric conditions and the pharmacology of the drugs that are used to treat them, so it has always been an interest of mine," he says.

That interest was nurtured and encouraged by his PhD supervisor Dr. Glen Baker, now a Professor Emeritus in the Department of Psychiatry after serving in various key roles – including Chair, Interim Chair, Acting Chair and Associate Chair in the Department of Psychiatry, and Director of the Neurochemical Research Unit – over more than four decades.

"I really enjoyed working with Dr. Baker. He's a great mentor. I still keep in touch with him and I have some projects on the go. He's got a genuine interest in science and research and he's always

willing to take on new projects and students," says Dr. Matveychuk.

"He was always open to collaborating with other people and taking on new projects, and he was always supportive, no matter what. That really helped to create a great atmosphere in the lab and he always had an open door policy which I really appreciated."

Dr. Andrew Holt, an Associate Professor in the Department of Psychiatry, also had a major influence on him, he says.

"He has a genuine interest in teaching and he taught a few of my classes. My undergraduate degree was in Pharmacology so he was

quite involved in a lot of my courses at that time as well. Like Dr. Baker, he's very invested in seeing his students succeed."

After completing his PhD, Dr. Matveychuk attended the Cumming School of Medicine at the University of Calgary, completing his medical degree in 2018.

"When I went through my Psychiatry rotations in medical school I found it very interesting. Every patient had a unique story and every day was a little bit different. There is truly something of an art to practicing Psychiatry. It takes a long time sometimes to find an effective treatment, so you have to be very patient," he says.

"Compared to other fields of medicine there is still relatively little that's known about how psychiatric diseases happen, and it's not really clear exactly how a lot of

the psychiatric drugs work. So I think over the next few decades we're going to develop a much better understanding of exactly what goes on in the brain, as more research is done."

Dr. Matveychuk's Residency training this year will be spent largely at Grey Nuns Hospital, where he'll work with both inpatients and outpatients.

"I'm only a few weeks in at this point so I'm still getting settled in and figuring out what my role is and how things work, but I'm really excited about it," he says.

"Each patient is quite different and requires their own approach, so a lot of creativity and consideration has to be used in order to figure out a plan that is of the most benefit to the patient." **C**



Dr. Dmitriy Matveychuk

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