## The View From Here:

## Perspectives on Northern and Rural Psychology

Volume 7, Issue I

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### Message From the Chair

It is with mixed feelings that I sit here writing my last "Message from the Chair" column. I have had the pleasure of serving as Chair for the Rural and Northern Psychology Section for the past 7 years. During this time I've witnessed the section grow from an initial membership of under 30 to a membership nearing 300. Serving as the Section Chair has afforded me wonderful opportunities to get to know and work with exceptional students and psychologists from across Canada and I look forward to maintaining these relationships. CPA staff have also been extremely supportive of our Section and efforts have been consistently made to have the rural/northern perspective woven into various committees and projects. I have no doubt the new Chair, Judi Malone, will have similarly positive experiences.

Although I will miss many aspects of the Chair position, I also look forward to the new perspectives and ideas that come with having a new Chair. Having known Judi for several years now, I have no doubt she will take on her new role with enthusiasm and dedication. The Section is truly fortunate to have her in this role and I look forward to supporting her within my capacity of Past-Chair as she transitions into her new role.

In addition to welcoming a new Chair to the section I also have the pleasure of welcoming several other new members to our executive committee. For the first time since the Section began we received nominations for all of the executive positions. This couldn't have been a nicer gift for me as I chaired my final AGM! Please join me in also welcoming Shelley Goodwin (Secretary/Treasurer), Cindy Hardy (Chair-Elect) and Jeffrey Ansloos (Student Representative).

The annual North Star Student Award was also presented at the Annual General Meeting in Halifax to Laura Armstrong (Ian Manion, co-author), University of Ottawa for her poster presentation entitled "The Anatomy of Rural-Urban Youth Suicidal Ideation: Who is at Greatest Risk. What Factors to Target. How to Intervene." This is the second time Laura has received this award. Congratulations Laura! Laura has been a very active member of the Section since its inception and has also recently agreed to take on the role of Editor for the Section newsletter.

Thanks again to everyone who has offered their support and encouragement to me over the past 7 years. I look forward to my continued involvement with the Section in my new role as Past-Chair and wish the newly elected executive committee all the best in their new positions.

Karen Dyck, Ph.D., C. Psych. Rural and Northern Psychology Section Chair

# The Anatomy of Rural-Urban Youth Suicidal Ideation—Who is at Greatest Risk. What Factors to Target. How to Intervene.

#### Submitted by Laura Lynne Armstrong

Supervisor: Dr. Ian G. Manion (Ontario Centre of Excellence for Child & Youth Mental Health)

<u>Background & Objective:</u> Youth suicide accounts for more deaths than cancer, AIDS, and all other natural causes of death combined. Greater still is the prevalence of suicidal thoughts and behaviours. As only 1 in 6 youth who need mental health services receive care, and 50% state that they would talk to no one about suicidal thoughts, the promotion of well-being prior to the emergence of suicidal thoughts is crucial. Promoting well-being is especially relevant for youth living in rural areas, where mental health service access is limited and more stigmatized than in urban areas. Rates of completed suicides are also higher in Canadian remote rural than urban regions.

Key predictors of youth suicidal ideation in the literature include depressive symptoms, risk behaviours, low self-esteem, and low perceived social support. Extracurricular activity engagement is inversely associated with these risk factors. Given this, the objectives of the present research were to: 1) explore non-remote rural versus urban differences in suicidal ideation by gender; 2) examine key risk factors for suicidal ideation by community, by gender; and 3) explore youth engagement as a protective factor for suicidal ideation in those at risk, based on depressive symptoms, risk behaviours, low self-esteem, low perceived support, or rural dwelling.

Methods: The present survey research was carried out with 813 (459 rural; 354 urban) secondary school youth in Eastern Ontario, as schools are a key venue in which mental health promotion initiatives can be carried out. Classrooms were randomly assigned to participate; participation took approximately 45 minutes. Safety protocols were in place. Measures included: 1) the Youth Engagement Matrix (measuring how meaningful engagement is to an individual), 2) Reynold's Suicidal Ideation Questionnaire, 3) the Beck Depression Inventory-II, 4) the Checklist of Risk Behaviours for Youth, and 5) the Social Support Questionnaire. Who is at greatest risk: We carried out an ANOVA to explore rural/urban differences in suicidal ideation. What factors to target: In a mediation model comparing rural/urban and gender groups, we examined the strength of prediction of depressive symptoms, risk behaviours, low perceived social support, and low self-esteem in relation to suicidal ideation. How to intervene: Interaction and simple slope regression analyses were carried out with youth engagement as a moderator between depressive symptoms, risk behaviours, self-esteem, and social support, as well as rural-urban dwelling, in the prediction of suicidal ideation.

<u>Main Findings:</u> Who is at greatest risk: Rural youth reported significantly more suicidal thoughts than did urban youth (main effect of rural-urban setting: F(1,812) = 10.90, p = .001). What factors to target: In a mediation model, depressive

## The Anatomy of Rural-Urban Youth Suicidal Ideation— Who is at Greatest Risk. What Factors to Target. How to Intervene. Cont.

symptoms, risk behaviours, self-esteem, and social support differed in importance in relation to suicidal ideation, by gender and rural/urban community. *How to intervene:* Concerning moderation analyses, meaningful engagement was a significant moderating variable for depressive symptoms (t = -5.52, p = .0001), risk behaviours (t = -3.23, p = .001), self-esteem (t = 4.34, p = .001), perceived social support (t = 3.23, p = .001), and rural dwelling (t = 2.21, p = .03) with suicidal ideation. As perceived meaningfulness of activity engagement increased, the relationships between risk factors and suicidal ideation decreased or were negated.

Conclusion & Contributions: This study was among the first to examine *non-remote* rural (1-2 hours from a city centre) versus urban differences in youth suicidal ideation in Canada. Rural females appear to self-report the most suicidal ideation, in comparison to rural males and their urban youth counterparts. The current research was the first to explore the relative importance of key risk factors for suicidal ideation in a mediation model by rural versus urban community. Findings suggest that a "one-size-fits-all" approach to prevention may neither be cost-effective, nor appropriate. The present study was the first to examine personally *meaningful* engagement, rather than simply engagement versus nonengagement, in its association with mental health. It was also the first to explore youth engagement as a moderator between risk factors and suicidal ideation. Acknowledging limitations, if follow-on research supports the present findings, meaningful youth engagement appears to be a prospective avenue for the prevention of suicidal ideation in individuals at risk, based on mental health or geographic risk factors.

## 8003



Karen Dyck, Chair, congratulates North Star Award winner, Laura Armstrong at the 2012 Rural and Northern Section Business Meeting.

#### **Ethics in the Rural Context**

#### Submitted by Judi Malone

We are like islands in the sea, separate on the surface, but connected in the deep.

~ William James

This standing feature on professional ethics is where we collectively share our stories from Canadian rural practice through vignettes and reflections that demonstrate challenges, rewards, & ethical dilemmas. We have explored boundaries, privacy, generalist practice, collaboration, & integrity. This 6<sup>th</sup> installment is a reflection on distance delivery of services

#### Services at a Distance

Recently, the Australian Psychological Society published, "Internet supported psychological interventions: A guide to navigating the online world of psychological programs" (APS, 2012). Although this resource is relevant to all in our evolving profession, the geography and context of rural practice make this an area of interest ... particularly the ethical implications.

Distance to services may be a barrier for rural and northern clients which may be further hampered by lack of supportive services like public transportation. Although not supported by empirical data, there is also the concern that local services may not be accessed due to concerns about anonymity and confidentiality (Schank & Skovholt, 2006). Both considerations apply to us as service providers as well.

One solution is the use of technology as a bridge to provide services at a distance, lessening some of the barriers of travel and visibility (Jameson & Blank, 2007) and decreasing isolation. This comes with viable guestions about:

- Security of information
- What creates truly informed consent under these circumstances
- How to identify client and privacy concerns
- Safety and reliability of access to technology

#### Consider the following vignette:

You have been providing treatment for major depressive disorder to a client with limited financial means. They travel to receive services. They will be without services for several weeks due to concerns with finances and transportation and request temporary email consultations. This occurs in a carefully structured fashion with clear consent and using a secure email server. One day, however, you get an email from their spouse expressing concerns and indicating that they have read your client's email related to therapy.

While this is only one potential ethical dilemma, technology that bridges distances can also assist with the resolution of other ethical concerns by doing more to

#### Ethics in the Rural Context Cont.

foster collegial support. Professional development issues can be managed with creative solutions that include fostering long-distance collegial networks, consulting with other professionals familiar with rural practice, and using technology to mediate distance for consultation and for professional development.

There are risks and benefits that need to be carefully -- and quickly -- considered.

#### **Current Dilemma – What Issues Arise for You?**

I am looking for your ideas, stories, humour, & wisdom on ethics in professional psychological practice in rural Canada for this column. What ethical dilemmas do you experience? I will be editing Ethics in the Rural Context but we will be writing this column together. Give me your ideas or write a column! Judi Malone, R. Psych., <a href="mailto:judim@athabascau.ca">judim@athabascau.ca</a>, 780-645-8214



#### References

APS (2012). Internet supported psychological interventions: A guide to navigating the online world of psychological programs. Retrieved 11 July 2012 from <a href="http://www.psychology.org.au/Assets/Files/APS-internet-supported-interventions.pdf">http://www.psychology.org.au/Assets/Files/APS-internet-supported-interventions.pdf</a>

Jameson, J.P., & Blank, M.B. (2007). Rural services: Defining problems and developing solutions. *Clinical Psychology: Science & Practice*, *14*, 283-298.

Schank, J.A., & Skovholt, T.M. (2006). *Ethical Practice in Small Communities: Challenges and Rewards for Psychologists*. American Psychological Association, Washington, DC.

#### **Recent Publications**

Bradley, Joshua M.; Werth Jr., James L.; Hastings, Sarah L.; Pierce, Thomas W. (2012). A Qualitative Study of Rural Mental Health Practitioners Regarding the Potential Professional Consequences of Social Justice Advocacy. *Professional Psychology: Research and Practice*. doi: 10.1037/a0027744

Silovsky, J., Bard, D., Chaffin, M., Hecht, D., Burris, L., Owora, A. et al. (2011). Prevention of child maltreatment in high-risk rural families: A randomized clinical trial with child welfare outcomes. *Children and Youth Services Review*, 33(8), 1435-1444.

Note: this article is reviewed at the Canadian Child Welfare Research Portal, http://www.cecw-cepb.ca

#### Online Resource

CNS Vital Signs, <a href="http://www.cnsvs.com">http://www.cnsvs.com</a>, is a testing facility that offers neuropsychological and related tests. If you register you get access to their library of rating scales and five free trials to evaluate utility for your practice. The download turns your office PC into a testing platform. The test battery includes neuropsychological tests that will be familiar to many newsletter readers. An online tool compiles graphs with standard scores and qualitative descriptors once the testing is completed. It is user friendly and has tests for children and adults. It appears to have good security features.

## A Day in the Life of a Rurally-Conscious, Private Practice Psychologist

#### Submitted by Ann A. Wetmore, M.Ed.

I've shortened the title from "a week in the life...", as I work in an urban centre in my small province (more like a small town) and probably 1/7<sup>th</sup> (the equivalent of one day per week) of my client population comes from more remote rural settings. I've chosen Friday as my example day, as that is my busiest client day, and often the day that out-of-town clients can arrange a bit of work flexibility to drive to see me. A typical travel distance would be about 150 km. each way, and the furthest about 320km. one way.

Sherlock Holmes supposedly used a "seven per cent solution" to accelerate his cognitive problem -solving processes—I'm referring to this column as my "fourteen per cent speculations" (1/7 = 14.3%). It is slightly based on my one-day stream of consciousness as a practitioner---that worked for writers such as James Joyce and Ian McEwan, so I'm hoping it will work here as well! My point is that, even if we are not always physically present in rural settings, we can be thinking rural, that is, being "rurally-conscious"...it goes like this:

...As I awake on my example Friday, the radio announcer is discussing a Provincial Cabinet shift, which will mean that someone new (and possibly inexperienced) will be looking after the Health portfolio. The announcer proudly informs me that if I want further details I can just go to the website...I think to myself, this is a Province-wide broadcast---how many have the capability to log on to a handy high speed computer to get the details? As someone who spent years on dial-up to support a community-based Internet service, I am well aware that there are areas in our province that still do not have Internet access, and many who do are still dependent on dial-up services, as wireless and high speed are not yet available in their regions. Also, the government has recently pulled funding from the community-accessible "CAP" sites, so forget about dropping in to check the webpages there!

By 8:30 a.m. I'm on the bus, discussing with a travel mate how the changes might affect or slow down health care initiatives---an older lady, who has just gotten on board with her groceries, joins in on the conversation. She states, "of course it will slow things down...everything is changing, and NOT for the better! I've worked for Home Care all these years and we all used to know each other and get together for staff meetings and mutual support---now they have us all on pagers and we get our assignments during the day by text messages, not even a human voice---no more going into the office...they call us by "remote locators"---the sense of ISOLATION is terrible! I'm glad I'm close to retirement." Hearing this, I think to myself, we are creating that sense of rural isolation even in "urban" settings and most of us stay blissfully unaware of what's going on---the assumption that technology is improving connections is false in many areas.

I start my client day...there are a great range of concerns (the following are composite examples):

Client A, a prominent resident in a small village, lost his teenage son to an alcohol-involved vehicle crash a few months ago, and he is trying to be strong for his family, but is overcome with grief...at the same time, his wife is drinking more to cope...he feels like everyone is watching them to see how they are doing day-to-day.

Client B, also from a small-population area, has been struggling with health problems for some time, and has just learned that funding for her local job has been slashed for the coming year---her anxiety about the future is high, and she faces the loss of health benefits. Her grown children

## A Day in the Life of a Rurally-Conscious, Private Practice Psychologist Cont.

(several of whom live away) are pressuring her to take early retirement, and she fears this will limit her life choices even further, as she was really planning to leave her husband.

Client C, a life-long fisherman, has been having anxiety attacks since last year when his buddy was lost overboard during a storm. He can't erase the pictures in his head of the drowned remains that were pulled from the ocean---he has some survivor guilt, "It should have been me! He was only 22!". His G.P. finally referred him in, because he can't sleep and thinks he is going crazy. He states that he can't face another fishing season.

Why do these clients make the effort to drive in so far? What are their common threads? I think one big motivator is PRIVACY, as they do not want to be recognized or be seen in their communities as help-seeking. That puts the onus on us to ensure that appointments are spaced sufficiently apart so that they will not encounter others in the waiting room, either going or coming. I think they also want to be treated with respect, as people, not as "cases", and to preserve a sense of normalcy, despite having had their worlds turned upside-down. Most have coped and functioned reasonably well in their lives, and now have encountered such a big life event that their usual "digging deeper and trying harder" coping style is not working. They want to regain a sense of mastery in their own lives, not to feel pathologized.

I get concerned when I hear some colleagues refer to cases such as these as the "worried well". It implies that they are less in need and less worthy of psychological services than those with more discernible diagnoses, deeply clinical in nature. I feel strongly that in a model of good mental health care, there is a role for the Psychological Generalist, like there used to be for the country doctor. We can actually reduce the stigma against mental help-seeking by addressing problems of living, and restore functioning in at a fairly rapid rate, cost effectively. I do believe that even distance treatment programs, or guided self-help treatments are enhanced by initial face-to-face encounters and intermittent follow-up. We cannot be replaced by technology, just enhanced by it if we are clever and responsible about how we use it. In the early years of the 20<sup>th</sup> century, those who practised psychology or psychiatry were called "Alienists". I consider it imperative that we reduce the sense of alienation and isolation that hampers people who are psychologically suffering in our society, whether rural or urban dwellers.

Now that you have tolerated my 14% speculations on rural care, here comes the additional "point three per cent", which is about my fantasy solution...for years, many have heard me rattle on about the need for a full-service, psychological and medical, "travelling mental health bus". If I won the lottery, that is what I would initiate in this province. Several decades ago, when I was in graduate school, three of us received a Dept. of Health summer grant to see whether women from town vs. rural areas, with diagnoses of cancer and/or depression, received equal treatment at their doctor's offices. Shockingly, even women who lived only 10km. outside of a small town stated that they felt like second-class citizens in the doctor's waiting rooms. Over and over again, in one area of Nova Scotia, the country women mentioned the "T.B. Inoculation Vans" that used to visit their communities "in the old days". What they told us was that the medical aspect legitimized everyone visiting the van, but inside there was much counselling that went on about domestic abuse, and other topical issues. Let's get innovative, let's collaborate, and let us not forget the importance of the human connection, in support of rural-dwellers, and also in support of our colleagues who are brave enough to work there.



## **Upcoming Conferences**

## Rural Linkages: Intercollaborative Practice for Safe & Healthy Communities Alberta Rural Development Network and Athabasca University September 28, 2012, Edmonton, Alberta

This conference will explore human services in rural Alberta and how they relate to safe and healthy communities. Join us 28 September 2012 to explore the landscape through interactive presentations on quality of life, challenges & gaps in rural human service provision, ideas for fostering vibrant communities, & collaboration to address deficits. Sessions will showcase communities, human services education, research, & professional practice in rural Alberta. For more information please visit the conference website <a href="http://www.athabascau.ca/rurallinkages2012/">http://www.athabascau.ca/rurallinkages2012/</a>

Recherche sur la santé en régions rurales et éloigneés: Approches créatives Rural and Remote Health Research: Creative Approaches Canadian Rural Health Research Society Oct. 25 to Oct. 27, 2012, Lévis, Quebec

This conference will provide unique opportunities for researchers, practitioners, policy makers, graduate students, and community members to express and share their creative approaches to knowledge translation for the health and well-being of rural and Northern residents. Visit the website for more information: <a href="http://crhrs-scrsr.usask.ca/levisqc2012/index.php">http://crhrs-scrsr.usask.ca/levisqc2012/index.php</a>

## **CPA Rural & Northern Section Representation Professional Affairs Committee**

Representative: Dr Judi L Malone

Context: Quarterly Meetings; New Chair Dorothy Cotton

#### Connectivity / Exposure for Rural and Northern Section

All section representatives provide regular section updates. There is regular sharing of information about student initiatives, research opportunities, and conferences of potential interest.

#### **Regular Updates**

- ◆ CPA Board Initiatives
- Publicly funded task forces
- Hospitals & health care
- Criminal justice
- School psychology
- Practice Directorate

#### **Collaborative Discussions**

- Human Resources Planning in Psychology -- Presentation by Karen R. Cohen, CEO of CPA on "Needs, Demand and Supply in Professional Psychology or How Well is Psychology Prepared to do What with Whom?" March 2012 with group discussion.
- 2. CPA practice guidelines ongoing development ideas & professional affairs contributions.
- 3. General discussion about Mandatory continuing education (provincial issue).

### Rural & Northern Section Business Meeting Minutes

#### **CPA 2012 Halifax**

#### Present

Chair -- Karen Dyck
Secretary-Treasurer -- Judi Malone
Newsletter Editor - Cindy Hardy
Section Members - Michael Decaire, Bob McIlwraith, Kian Madjedi, Shelley
Goodwin, Laura Armstrong, Rebecca Wells, Susan Farrell

Quorum not established
Information sharing meeting rather than official section business meeting

#### **Topics Reviewed**

#### 2011 Minutes

It was noted that there was an omission in the 2011 minutes, namely the discussion about student loan repayment discussion to have been undertaken by Shelley.

#### **Section Chair Annual Report**

Karen provided a verbal review of her report which is available online on the section website.

#### **Financial Report**

Presented by Judi; Noted the need to correct the date to 2012, not 2021

#### **Business Arising from the Minutes**

- ◆ Shelley discussed collaborations with the Student Section & Melissa Theissen of CPA which are ongoing specific to student loan repayment considerations. Currently considering a survey of needs and targeting the Supply & Demand taskforce recommendations in addition to the needs of our large student contingent in the section.
- The newsletter was discussed and Laura agreed to take over as the editor.
- ◆ There was discussion of the need for an Ad-Hoc student committee to collaborate with Shelley and the Education section regarding loan repayment and to review ways that this section could better support their student members.
- Karen to explore options for the use of technology to allow for access to Section Business Meeting by members not at the convention
- ◆ Convention planning was discussed. Again, there was agreement of the need to seek out keynote speakers and section speakers 2 years in advance. Brainstormed ideas included Sandra Collins (culture infused practice / social justice) or Rod McCormack (Aboriginal / social justice) for Vancouver (social justice), Ian Mannion or federal ministers when near Ottawa; Considering non-psychologists specific to collaboration

### Rural & Northern Section Business Meeting Minutes Cont.

#### **Committee Reports**

- Judi presented a report on the ongoing work of the Professional Affairs Committee of CPA of which she is a member
- Susan noted that she will be able to represent this section through her work on the Scientific Affairs Committee

#### **New Business**

- Provincial Representation Karen proposed exploring the idea of provincial representatives for the section; These individuals could represent their region by being a communications and information link and can summarize events in their region within the newsletter to represent the variety across northern & rural practice in Canada.
- Newsletter Updates Section newsletter was not successful in the recent newsletter competition; "Spring" edition to come out shortly, please submit articles to Cindy as this will be her last newsletter; Desire to continue promoting "A Week in the Life of a Rural Psychologist" and engaging students to contribute
- History Section acknowledged that we have been active for 7 years; Shelley suggested documenting the history of the section more formally than the current oral history

#### **North Star Student Award**

2012 award recipient Laura Armstrong was recognized for her work with *Communities at risk: Factors that predict elevated suicide ideation in rural youth.* She was commended for her contributions to our section and the convention.

#### **Election**

- ◆ Chair Judi Malone was elected by acclamation
- Chair-Elect electronic vote to take place, call will be done via the listserv
- ♦ Secretary-Treasurer Shelley Goodwin was elected by acclamation
- Student Representative -- electronic vote to take place, call will be done via the listsery

#### **Discussion**

Karen reviewed the request for feedback from the Chair of the Ethics Committee specific to the revision of the Canadian Code of Ethics for Psychologists. Following discussion it was determined that the discussion would be continued through the listserv and that Karen would provide a formal response to the letter from our section.

#### **Section Reception**

A successful section reception was hosted as the meeting was adjourned at approximately 3:20

### Annual Rural & Northern Section Report 2011/2012

#### **Section Executive**

Chair: Karen Dyck
Chair-Elect: Vacant
Secretary-Treasurer: Judi Malone
Student Representative: Rebecca Wells

#### **Section Volunteers**

Newsletter Editor: Cindy Hardy
Professional Affairs Committee Representative: Judi Malone
Webpage Manager: Melissa Tiessen

#### Membership

Our membership number has remained stable since last year (271 current members); although our representation of student members as increased from 59% to 70%. I view our student membership as a strength as it provides an opportunity for the section to highlight the numerous advantages of pursuing a career in rural and northern psychology.

#### **2011 Annual Convention Activities**

We had a good presence at the 2011 convention in Toronto, which included 3 poster sessions, 1 conversation session and our Annual General Meeting.

#### **2011 North Student Award**

The North Star Student Award was established by the Rural and Northern Psychology Section in 2008 to recognize the student with the most meritorious submission to the Rural and Northern Section of the CPA annual convention. There are two categories of competition; poster presentations and oral presentations. In 2011 we received to submissions only for the poster presentation category. Given this situation and the caliber of poster submissions we elected to give two awards in this category. Awards were presented to the following students during our AGM:

Shelley Goodwin, Fielding Graduate University. M-CHAT and PDDST-2 as Predictors of Autism Spectrum Disorders in Young Children Living in Rural Canada.

Laura Armstrong (co-author lan Manion), University of Ottawa. Communities at Risk: Factors that Predict Elevated Suicide Ideation in Rural Youth.

#### Past-Year Projects

We were successful at recruiting a new Student Representative, Rebecca Wells, University of Waterloo. There were no nominations for other vacancies.

Section newsletter continues to be published twice yearly. Based on member input, a regularly occurring column entitled A Week in The Life of a Rural/Northern Psychologist was introduced.

2011 Annual General Meeting: Consistent with previous years, we did not reach quorum. Nonetheless, we used this time as an opportunity to exchange thoughts and ideas related to the section and the area of rural and northern psychology.

Our section was successful in its efforts to nominate two speakers for the 2012

### Annual Rural & Northern Section Report 2011/2012 Cont.

**CPA Convention:** 

Keynote speaker: Dr. Elizabeth Church. Helping People Help Themselves: Self-Directed Treatments in Rural Settings (Thursday June 14 at 4:00pm).

Invited speaker, Dr. Pierre Ritchie (nomination co-sponsored by the Health Psychology and Clinical Psychology Sections).

Psychologists' Role in Rural/Northern and Urban-Based Collaborative Care Models (Friday June 15 at 10:00am).

#### **Next-Year Projects**

Collaboration with other sections: Ongoing efforts will be made to respond to and seek out opportunities to collaborate with other sections on various projects.

Recruitment: Efforts will continue with respect to strengthening membership involvement in the executive committee.

Training resources: Look into setting up a document outlining rural/northern specific training opportunities (e.g., practica, residencies) in Canada.

Convention activities: We continue to work towards having a greater presence at the Annual Convention and continue to explore options (e.g., travel bursaries, technology) to support the participation of members living in more remote communities.

Karen G. Dyck, Chair

Please forward all submissions to the attention of: Dr. Judi Malone Section Chair

Phone: (780) 645-8214 E-mail: judim@athabascau.ca



The Newsletter is produced by the Rural and Northern Section of the Canadian Psychological Association (CPA) and is distributed to members of the Section. The purpose of the Rural and Northern Section is to support and enhance the practice of rural and northern psychology. The goals of the section are: 1) Establish a network of professionals interested in the areas of rural and northern psychology (this may include individuals currently practicing in rural/northern areas of those with an interest in this area), 2) Enhance professional connectedness by facilitating linkages between rural and northern practitioners, 3) Distribute information relevant to the practice of rural and northern psychology, 4) Provide a forum to discuss practice issues unique to this specialty, and 5) Introduce students and new or interested psychologists to rural and northern practice.

This issue of the Newsletter was edited by Karen Dyck and Cindy Hardy. Many thanks are extended to Crystal Rollings for her invaluable contributions to design and layout.

The opinions expressed in this newsletter are strictly those of the authors and do not necessarily reflect the opinions of the Canadian Psychological Association, its officers, directors, or employees.

All submissions are reproduced as submitted by the author(s).

#### **Call for Submissions**

The Newsletter Editors invite submission of articles and items of general interest to rural and northern psychologists. Faculty and students are encouraged to send submissions for the next newsletter to Judi Malone, <a href="mailto:judim@athabascau.ca">judim@athabascau.ca</a> or Laura Armstrong, <a href="mailto:cparuralnorthernnewslet-ter@gmail.com">cparuralnorthernnewslet-ter@gmail.com</a>. We also welcome submissions of photos of rural life and settings.

