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Guest Editor,

Dr. Lisa Votta-Bleeker

to inform policy? to alleviate distress? to train the next generation?



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INSIDE THIS ISSUE

- 4 From the President's Desk
- 5 Un mot du président

Special Issue | Édition Spéciale

6-21

Mental Health, Homelessness, and Housing

Santé mentale, l'itinérance et le logement

- 22 Head Office Update
- 25 Nouvelles du siège social
- 29 CPA Affairs | Affaires de la SCP
- 36 CONVENTION | CONGRES
- 42 In Memoriam
- 44 Psychology in the Spotlight
- 45 Campus Profile

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Knowledge Mobilization From Data to Practical Application

E. Kevin Kelloway, Ph.D., CPA President (2015-2016)

As I tell my graduate students, there is a rhythm to academic life – you collect data in the winter, analyze and write during the spring and summer, and submit to conferences and for publication in the fall. Of course this means that at this time of year, academics, both young and not so young, are waiting to hear the outcome of their conference submissions; including those who submitted to CPA and plan to join us in Victoria this June.

Those of us who lay claim to the title of scientist-practitioner hope that the results of our research go beyond presentation at a conference and publication in a good journal. We hope that our research informs and guides practice and policy. In my case, I hope to influence and change organizational practice, while others hope to change individual behaviour or even the behaviour and policies of governments.

Certainly many of our members would be thrilled if our federal government followed the lead of our neighbours to the South. In September 2015, President Barack Obama issued an executive order mandating that government agencies incorporate behavioural science research results in their decision making and policies. In two months, I will join my colleagues on the CPA Board in a lobby day during which we will attempt to educate and influence our federal representatives on issues directly relevant to psychology. Enactment of a Canadian executive order mandating that politicians pay attention to psychological research would be an outcome far exceeding our expectations.

Failing a prime ministerial order what else can we do to bring the results of psychological research into practice? Many of the granting agencies now require applicants to submit a knowledge mobilization plan as part of their application. In the plan, grant applicants are typically required to define who the audiences are for the research findings and to outline plans for packaging the results in a way that is useful for each audience. Conferences and academic publications are forms of knowledge mobilization – so are Twitter feeds, YouTube videos, and newspaper articles.

This past fall, CPA organized and hosted a knowledge mobilization summit that brought together representatives from the granting agencies, researchers wanting to learn more about knowledge mobilization, and researchers who have done good science and successfully made their results meaningful to non-academic audiences. For many of us, this is a new role and not always one in which we are comfortable.

One of the clear outcomes of the knowledge mobilization summit for me was the potential for CPA to be a knowledge broker – working with psychological researchers to bring research results to the attention of potential audiences. Our long established "Fact Sheets" are a form of knowledge mobilization; however, we are now also involved in developing online continuing education programs. Our web and social media presence provides yet another means of reaching out to non-academic audiences to communicate the value and relevance of psychological research.

I hope that we can continue to expand this role. Publicizing the value and relevance of psychological research and making research results accessible to multiple audiences is pretty close to the mandate of CPA. Our focus on evidence and on promoting evidence-based practice has considerable value in a world where everyone with a Twitter account is an instant expert. I don't know if we will see any level of government requiring policies to be based on research findings – but I do know that we can do a great deal more to enhance the relevance of our research to a variety of communities.

Of course, there is still considerable value in the "old ways," so I hope to see you at our annual convention in Victoria this June. There will be lots to talk, and even to Tweet about!

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La mobilisation des connaissances

De la collecte de données jusqu'à l'application pratique

individuels, voire le

comportement et les

politiques des

gouvernements.

E. Kevin Kelloway, Ph. D., président de la SCP (2015-2016)

Comme je le dis à mes étudiants diplômés, la vie universitaire suit un rythme particulier - nous collectons les données en hiver et analysons et rédigeons au printemps et à l'été, puis, à l'automne, nous soumettons des propositions pour présenter le fruit de notre travail à différents congrès, et pour le publier. Cela signifie donc que, à cette époque-ci de l'année, les chercheurs, jeunes et moins jeunes, y compris ceux qui ont proposé une communication à la SCP et ceux qui envisagent de se joindre à nous à Victoria, en juin prochain, attendent de savoir si leurs propositions de communication ont été acceptées.

Ceux d'entre nous qui revendiquent le titre de chercheurpraticien espèrent que les résultats de recherche iront plus loin qu'une présentation à un congrès et la publication dans une bonne revue. Nous voulons que nos recherches éclairent et orientent la pratique et les politiques. Certains, comme moi, espèrent influencer et changer les pratiques organisationnelles,

tandis que d'autres espèrent changer les comportements individuels, voire le comportement et les politiques des gouvernements.

Beaucoup de nos membres seraient sûrement ravis si le gouvernement fédéral suivait l'exemple de nos voisins du sud. En septembre 2015, le président Barack Obama a émis un décret exigeant que les organismes gouvernementaux incorporent dans leurs décisions et leurs politiques les résultats de recherche de la science du comportement. Dans deux mois, je participerai avec mes collègues du conseil d'administration de la SCP à une journée de lobbying, pendant laquelle nous tenterons de sensibiliser et d'influencer les

représentants fédéraux sur des questions qui concernent directement la psychologie. L'adoption d'un décret canadien exigeant que les politiciens prêtent attention à la recherche en psychologie est un résultat qui dépasserait de loin nos attentes.

À défaut d'une ordonnance du premier ministre, que pouvons-nous faire pour mettre en pratique les résultats de la recherche en psychologie? De nombreux organismes subventionnaires exigent désormais aux demandeurs de subvention de soumettre un plan de mobilisation des connaissances dans le cadre de leur demande. Normalement, le demandeur doit définir dans le plan les publics qui utiliseront les résultats de recherche et décrire ce qu'il compte faire pour présenter les résultats dans un format utile à chaque public visé. Les congrès et les publications universitaires sont des formes de mobilisation des connaissances - tout comme les flux Twitter, les vidéos sur YouTube et les articles de journaux.

L'automne dernier, la SCP a organisé et tenu un sommet sur la mobilisation du savoir, qui a réuni des représentants d'organismes subventionnaires, des chercheurs désireux d'en apprendre davantage sur la mobilisation des connaissances et des chercheurs qui ont à leur actif des travaux scientifiques de qualité et qui ont réussi à rendre leurs résultats significatifs pour des publics non universitaires. Pour beaucoup d'entre nous, il s'agit d'un nouveau rôle, avec lequel nous ne sommes pas toujours à

Selon moi, l'un des résultats les plus évidents du sommet sur la mobilisation du savoir est l'occasion qui s'offre à la SCP de devenir un courtier du savoir - en travaillant avec les chercheurs en psychologie pour attirer l'attention des auditoires potentiels sur les résultats de recherche. Nos « Fiches d'information », que nous publions depuis longtemps, constituent une

> forme de mobilisation des connaissances; cependant, nous avons également commencé à élaborer des programmes de formation continue en ligne. Notre présence sur le Web et dans les médias sociaux fournit un autre moyen d'atteindre des auditoires non universitaires pour communiquer la valeur et la pertinence de la recherche en psychologie.

> J'espère que nous pourrons continuer de développer ce rôle. Faire connaître la valeur et la pertinence de la recherche en psychologie et rendre les résultats de recherche accessibles à plusieurs auditoires cadrent dans une grande mesure avec le mandat de la

SCP. L'attention que nous portons aux preuves scientifiques et à la promotion de la pratique fondée sur des données probantes a une grande valeur dans un monde où le fait de posséder un compte Twitter fait instantanément de vous un expert. Je ne sais pas si, un jour, le gouvernement exigera que les politiques soient basées sur les fruits de la recherche; mais je sais que nous pouvons faire beaucoup plus pour améliorer l'utilité de nos recherches pour une variété de collectivités.

Bien sûr, les « anciennes méthodes » restent toujours très valables; j'espère donc vous voir au congrès annuel, qui se tiendra à Victoria, en juin de cette année. Les occasions d'échanger, voire de *tweeter*, ne manqueront pas!



The Role of Psychology in Addressing Homelessness

Lisa Votta-Bleeker, Ph.D.

Deputy CEO and Director, Science Directorate,
Canadian Psychological Association



It gives me great pleasure to serve as Guest Editor for this issue of Psynopsis, focussed on mental health, homelessness, and housing. My experience working with individuals who were homeless began in 1997 when I first moved to Ottawa to begin my Ph.D. studies at Carleton University. In need of part-time work, I applied for a position at the Salvation Army Young Men's Shelter. Within days of applying, I was called for an interview, and within days of that interview, I had my first shift at the shelter. Who knew the path that choice would take me down? What started as a part-time job became a place where I would collect the data for my dissertation; see my work result in service delivery and systems change; meet long-lasting friends and research colleagues; and perhaps most importantly, learn to see the youth, men, and families accessing the shelter's services as individuals rather than faces one ignores when walking down the street.

Homelessness is a significant public health issue facing hundreds of thousands of Canadians – including, but not limited to, individuals we see on the street, individuals who temporarily stay with family or friends (aka "the hidden homeless"), families with children, Canada's Aboriginal population, refugees, and youth – on any given day. Simply defined, homelessness is the absence of a regular place to live. In this absence, one who is homeless will stay in an overnight emergency shelter, in an abandoned building, in a car, outdoors, in an all-night coffeeshop/deli/theatre, on a friend's couch, or in other such places that are not meant to be living spaces. Numerous bio-psychosocial factors impact one's entrance and exit from homelessness, including but not limited to: poverty, physical and/or mental health problems, experiencing and/or witnessing violence or abuse in the home, engagement in criminal activity, addiction, unemployment, low education levels, and lack of affordable housing.

There is much we can do to end homelessness. Managing the problem through a reliance on emergency services and supports is a temporary solution, but one that doesn't end homelessness. Emphasizing prevention with a focus on the social determinants of health, on the other hand, helps to reduce homelessness, as does quickly moving those that do become homeless into housing with necessary supports. With housing and the right supports, individuals that are chronically homeless can become and remain housed. However, the lack of affordable housing remains a critical piece to solving the problem of homelessness in Canada.

In line with this, my dissertation looked at the role that "a disengaging coping style" played in the psychological adjustment of homeless youth. My results showed that compared to non-homeless youth, homeless male youth had a greater tendency to disengage from all aspects of life, particularly stressful aspects, and that this tendency put them at greater risk for psychological difficulties, poor interpersonal relationships, and poor physical health – perhaps not surprising results to some, but the issue had never been looked at before with respect to homeless youth. Those findings led to changes at the shelter in terms of how services were delivered to the youth and what questions were asked at intake to better identify future courses of intervention/action for those youth in the shelter system and those that would undoubtedly come.

I have had the great fortune of staying connected with many colleagues who are doing great work in the areas of prevention and intervention with individuals either experiencing homelessness or at-risk-of homelessness, and learning about the innovative work new researchers to the field are conducting. Examples of some of that work are featured in this issue. You'll read about a psychologist who sees clients in a shelter; an innovative music program that brings homeless and at-risk youth together in a choir; an upstream community-level prevention program focussed on helping marginalized youth; and At Home/Chez Soi and its evaluation of the Housing First model as an effective means of maintaining housing for adults with mental illness and substance abuse issues.

Psychologists have a great deal of which to be proud when it comes to the work they have done to provide services to individuals who are homeless; however, there is still much work to be done. Health providers, researchers, community agencies and partners, and policy-makers must work together to address the many bio-psycho-social factors that contribute to the cycle of homelessness. I hope upon reading this issue, you'll be inspired to explore a new research question, be innovative and open in your approaches to providing psychological services, and last but certainly not least, become an advocate for housing policy changes, availability of appropriate supports, and access to psychological services.



Le rôle de la psychologie dans la lutte contre l'itinérance

Lisa Votta-Bleeker, Ph.D. Directrice générale associée et Directrice générale de la science, Société canadienne de psychologie

C'est pour moi un immense plaisir d'être la rédactrice en chef invitée du présent numéro de Psynopsis, qui porte sur la santé mentale, l'itinérance et le logement. Mon expérience de travail auprès des sans-abri a commencé en 1997, lorsque je suis arrivée à Ottawa pour faire mes études de doctorat à l'Université Carleton. À la recherche d'un emploi à temps partiel, j'ai postulé à un poste dans un refuge pour jeunes hommes de l'Armée du Salut. Quelques jours après avoir posé ma candidature, j'ai été convoquée à une entrevue, et peu de temps après, je faisais mon premier quart de travail au refuge. Qui aurait su où me conduirait la décision que j'avais prise alors? Ce qui a commencé comme un emploi à temps partiel est devenu un endroit où je pourrais recueillir des données pour la rédaction de ma thèse, où je verrais les résultats de mon travail se traduire en prestation de services et contribuer à des changements à l'intérieur du système, où je tisserais des amitiés durables et rencontrerais des collègues chercheurs, et surtout, où j'apprendrais à voir les jeunes, les hommes et les familles qui ont recours aux services du refuge comme des personnes, et non comme des visages anonymes que l'on ignore lorsqu'on marche dans la rue.

L'itinérance est un problème de santé publique important auquel font face, chaque jour, des centaines de milliers de Canadiens – y compris, mais sans s'y limiter, les personnes que l'on voit dans la rue, les personnes qui séjournent temporairement chez un membre de leur famille ou des amis (aussi appelés les « sans-abri cachés »), les familles avec enfants, la population autochtone du Canada, les réfugiés et les jeunes. En termes simples, l'itinérance est la situation d'un individu qui n'a pas de logement stable. Sans logement stable, la personne itinérante ira dormir dans un refuge, dans un immeuble abandonné, dans une voiture, dehors, dans un café/dépanneur/cinéma ouvert 24 heures sur 24, sur le divan d'un ami ou dans d'autres endroits qui ne sont pas censés être des lieux de vie. De nombreux facteurs biopsycho-sociaux font qu'une personne deviendra un sans-abri et se sortira de l'itinérance, notamment, la pauvreté, les problèmes de santé physique ou mentale, le fait de subir de la violence et des agressions à la maison, ou d'en être témoin, la participation à des activités criminelles, la toxicomanie, le chômage, le faible niveau de scolarité et le manque de logements abordables.

Nous pouvons faire beaucoup de choses pour mettre fin à l'itinérance. La gestion du problème par le recours aux services et à l'aide d'urgence est une solution temporaire, qui ne met pas fin à la situation d'itinérance. En revanche, la prévention, axée sur les déterminants sociaux de la santé, contribue à réduire le nombre de sans-abri, tout comme le fait l'accès rapide au logement aux personnes itinérantes, accompagné du soutien nécessaire. Avec un logement et le soutien adéquat, les sans-abri

chroniques peuvent se loger de manière permanente. Toutefois, le manque de logements abordables demeure un élément critique, dont il faut tenir compte pour résoudre le problème de l'itinérance au Canada.

Dans cette optique, ma thèse portait sur le rôle joué par le « mode d'adaptation axé sur le désengagement » dans l'adaptation psychologique des jeunes sans-abri. Mes résultats montrent que, comparativement aux jeunes qui ne sont pas sans domicile fixe, les jeunes hommes sans-abri ont plus tendance à se désinvestir de tous les aspects de leur vie, particulièrement les aspects stressants, et que cette tendance les rend plus vulnérables aux problèmes psychologiques, aux mauvaises relations interpersonnelles et à une mauvaise santé physique - ces constatations sont peut-être peu surprenantes pour certains, mais la question n'avait jamais été étudiée auparavant chez les jeunes itinérants. Ces résultats ont conduit à des changements au refuge, en ce qui concerne la façon dont les services sont offerts aux jeunes et les questions à poser au moment de l'admission afin de mieux cerner les interventions et les mesures destinées précisément aux jeunes qui séjournent dans les refuges et ceux qui y séjourneront

J'ai eu le privilège de rester en contact avec plusieurs chercheurs, qui font un travail remarquable au chapitre de la prévention et de l'intervention auprès des sans-abri ou des personnes qui risquent de le devenir, et de rester au fait du travail d'avantgarde qu'accomplissent les nouveaux chercheurs dans le domaine de l'itinérance. Certains de ces travaux sont présentés dans ce numéro spécial. Vous pourrez y lire l'expérience d'une psychologue qui voit des clients dans un refuge; un programme de musique original, qui réunit, en une chorale, des itinérants et des jeunes qui risquent de devenir des sans-abri; un programme de prévention communautaire en amont, qui vise à aider les jeunes marginalisés; et enfin, le projet Chez soi et son étude de l'approche Logement d'abord, qui s'avère un moyen efficace pour aider les adultes souffrant d'une maladie mentale et de problèmes de toxicomanie à conserver leur logement.

Les psychologues ont vraiment de quoi être fiers du travail qu'ils accomplissent pour fournir des services aux personnes itinérantes; toutefois, il reste encore beaucoup à faire. Les fournisseurs de services de santé, les chercheurs, les organismes et les partenaires communautaires, ainsi que les décideurs doivent travailler ensemble afin de comprendre les nombreux facteurs biopsycho-sociaux qui contribuent au cycle de l'itinérance. J'espère que, à la lecture du présent numéro, vous aurez envie d'explorer de nouvelles questions de recherche, que vous ferez preuve d'innovation et d'ouverture dans votre façon d'offrir les services psychologiques, et, surtout, que vous militerez en faveur des changements nécessaires à apporter aux politiques sur le logement, de la mise en place de mesures de soutien appropriées et de l'accès aux services psychologiques.



Finding a Home for the Homeless:

The At Home/Chez Soi Study



Paula Goering, RN, Ph.D. Research Lead, MHCC At Home/Chez Soi

What was learned by the investment of \$110 million dollars into At Home/Chez Soi, a multi-site pragmatic trial of Housing First conducted in five Canadian cities? The complete answer to that question would require far more words and space than are available. The breadth and depth of the knowledge gained far exceeds what can be easily communicated. Still, 2.5 years after this ambitious study ended is a good time to provide a brief overview of some of the findings that have been published in close to 90 peer-reviewed articles written by the project's research teams. What follows cannot do justice to the smorgasbord of topics that have been covered, but will hopefully give you a taste of what can be found from the cross-site analyses so that, depending upon one's intellectual tastes and appetites, you can dig deeper into the relevant literature.

Our first course is a quick introduction to the rationale and methods of the study. Housing First, true to its name, offers people who are homeless and have a severe mental illness immediate access to regular housing in the community with no preconditions. It is based upon a Pathways to Housing program in New York City (Tsemberis, 2010). The study involved 2,148

people in five cities across Canada randomized to receive either Housing First plus assertive community treatment (for those with high needs) or intensive case management (for those with moderate needs) rather than treatment as usual. Descriptions of the study protocol and the mixed methods design provide more detail (Goering et al., 2011; Macnaughton, Goering, & Nelson, 2012).

Now, the main course... The two overarching questions for the multi-site trial had to do with implementation and outcomes. What could be learned about how to implement this best practice intervention through putting it in place in five different city contexts? What effects would the implementation of housing first have upon the participants and the systems in which they were living? Findings from the study show that Housing First can be successfully adapted to different contexts and for different populations without losing its fidelity (Keller et al., 2013; Stergiopoulos et al., 2012; Keller et al., 2014; Nelson et al., 2014; Macnaughton et al., 2015). Results from the two-year follow-up demonstrate that people receiving Housing First achieved superior housing outcomes and showed more rapid improvements in community functioning and quality of life than those receiving treatment as usual (Aubry et al., 2016; Stergiopoulos et al., 2015; Aubry, Nelson, & Tsemberis, 2015).



In-depth interviews with a subgroup elaborated on the changes in their lives (Nelson et al., 2015a). There was a

small proportion of people (13 %) who were unable to achieve housing stability after one year of receiving Housing First, but only a few weak predictors differentiated that subgroup (Volk et al., 2016). There were also significant cost offsets associated with the intervention, especially for those in the high need group (Ly & Latimer, 2015). Interestingly, both the cost savings and health outcomes would have been greatly overestimated if a pre-post design had been used rather than a RCT.

Next, lets take a tour of the kitchen that produced this banquet to learn about planning and conducting a project of this scope and size. Qualitative methods tell the story of how the initiative came about (Macnaughton, Nelson, & Goering, 2013), how stakeholders in five Canadian communities were mobilized to plan and implement a complex community intervention (Nelson et al., 2013; Nelson et al., 2015b), and what the policy and practice legacy of the project has been. We have shown that a high level of collaboration can be incorporated into a randomized controlled trial and that it is critical to use a flexible approach to ongoing learning and adaptation as unintended consequences arise (Nelson, Macnaughton, & Goering, 2015).

Side dishes can make or break a good meal. In this case the development of innovative research methods provides learning that will appeal to a wide audience who want to conduct similar studies. A pragmatic trial that included providing housing and

supports to vulnerable individuals posed ethical challenges that required rethinking some of the usual

clinical trials procedures and policies (Silva et al., 2014). A new tool to measure the objective quality of the housing situation will be an asset for future research (Adair et al., 2014). Supporting peer-lead research has proven its value in adding a unique perspective to our knowledge about service provision (Voronka, Harris, Grant, Komaroff, Boyle, & Kennedy, 2014).

Dessert is still being prepared. There is an ongoing CIHR-funded study of sustainability and the scaling up of Housing First across Canada is in progress. Longer-term follow-up studies of program and participant outcomes are also being completed in all five cities. The complete database from the original study is now available to others who want to delve into the many questions that have not yet been addressed.

Extraordinary effort and superb teamwork of hundreds of individuals went into the execution of this project. Multi-disciplinary research teams were major players, featuring professionals from a range of disciplines including psychiatry and geography. Among all the chefs, there was a predominance of psychologists as investigators, consultants, and authors. The psychology profession has good reason to be very proud of its contributions in essential roles throughout this challenging project.

For a complete list of references, please go to www.cpa.ca/psynopsis

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The Transformative Power of Music







Simon Abbott, Music Director, Phoenix Community Choir; Scott Jones, Arts Administrator, Youth Development Program; and Valerie Shapiro, MSW, Director of Community Programs.

Phoenix Youth Programs has been providing service for and caring about youth in Halifax, Nova Scotia for over 27 years. We work with youth who face multiple barriers such as housing insecurity; food insecurity; and inadequate access to regular health care, education, and secure employment.

This article will discuss the Phoenix Community Choir, which is made up of youth, staff, and other members of the Phoenix community.

Choir is about nurturing the soul, and our choir works to support youth and improve their lives. The program is based on the theories of Youth Development and Empowerment and is ultimately informed and influenced by the transformative power of music.

Youth Development

We recognize that young people learn through experience. They are searching for opportunities to express their individuality and independence as they transition into adulthood. We value the knowledge, skills, and lived experiences that they bring and see our role as preparing and promoting their development by providing opportunities that focus on personal, social, and emotional growth (Damon, W, 2004). We are intentional about our programs, our practice, and our spaces so that we create a tone and culture that meets their unique developmental

needs.

Our choir programming is designed to support youth in their development and encourages both formal and informal learning. We utilize the profound transformative power of music as a platform to engage youth and build their capacity for skill development. Studying music improves performance in many areas such as math, language skills, and even physical coordination (Clements-Cortes, 2012). The rhythmic aspect of music is the focus of music therapy for both mental and physical wellness because it trains the body to regulate movement (Clements-Cortes, 2012).

More specific to the Phoenix choir, are the psychological and social benefits of music, particularly group music therapy. Singing has been shown to be a powerful mood regulator, and an excellent way to expel stress and negative emotions (Lamont, 2012). Making music regularly in a group is also provides opportunities to develop interpersonal relationships.

It is important that staff, youth, and volunteers in the choir work together as equal partners on a creative project – this levels the playing field for relationships that often have a steep power dynamic. In this environment, youth and community alike can develop life changing social and emotional connections.

Empowerment Theory

Being empowered is about having the ability to control, influence, make decisions and bring about change. This can be broken down into personal, interpersonal, and community empowerment. To be empowered is to have power over one's own





actions and the direction of one's life; to have power in choosing and managing one's relationships with others; and to have the power to change policy, behaviour, and opinions in a larger group, institution, or community (Labonte, et al., 1994).

Choir rehearsal and performance builds confidence in all three forms of empowerment for the youth who take part, and this empowerment is applied to their socializing, goal-setting, and life outside of choir.

There are increasingly difficult challenges to overcome in choir: auditioning to have one's range checked is very intimidating, as is singing with others in a group for the first time, and of course, performing (Lamont, 2012).

Choir provides youth with an immediate return on investment. When a young person takes a risk, they are immediately rewarded with positive feedback. For instance, when a youth goes on to sing a solo or speak at choir performances they are immediately recognized through applause and support. The moment of success that comes when youth receive a standing ovation at a concert they have been preparing for for months is personally empowering in the extreme. It can be seen in the faces of youth as they are congratulated by family, staff, and even strangers in the audience. There are smaller moments of success as well, such as when a youth learns the basics of music literacy or meets with an artist who is performing with the choir. Each risk a youth takes builds confidence and self-esteem that impact the rest of their lives.

Singing in a group, particularly when a youth is performing for the first time in front of hundreds of people, requires reliance on the other members of the choir. Through the collective creative process of rehearsal, and the stress and success of performance, the choir community is made strong and supportive. Choir members have visited each other in the hospital during pregnancy or mental health breaks, written songs for each other's birthdays, and sat with each other when the emotion of a song overwhelms. It is also meaningful for youth to see their workers engage with them on an equal playing field in an activity like the choir, and not just in a formal capacity as part of their jobs.

It is perhaps surprising that it is in community empowerment that the choir excels most strongly. Unlike most other choirs, the Phoenix Choir performs not just for fun but to share a message. For the choir, performance has become a platform for advocacy. Through repertoire choice and through sharing stories and opinions in spoken sections between songs, youth get the opportunity to express and legitimize their political, generational, sexual, and community values and experiences.

They have performed at youth mental health expositions, fundraisers and events for community organizations, and for many schools and student meetings. To these performances they bring messages on themes such as marginalization, mental health stigma, LGBTQ experiences, and housing insecurity. The end result is the discovery of the power of one's voice to change public opinion and even policy in the wider community.

The Phoenix Community Choir is a program where theory meets practice and where young people share together in moments of great triumph, hard work, and tremendous success. It is a place where youth can channel the many psychological and social benefits of music. It is a place where they feel dignified, strong, and resilient. Choir is a place where youth are celebrated, the soul is stirred, and everyone is transformed.

Please take a look at this example of our Choir in action in "Now." Original works by Dave Carrol: https://www.youtube.com/watch?v=HjpoAhlJ_xw

For a complete list of references, please go to www.cpa.ca/psynopsis

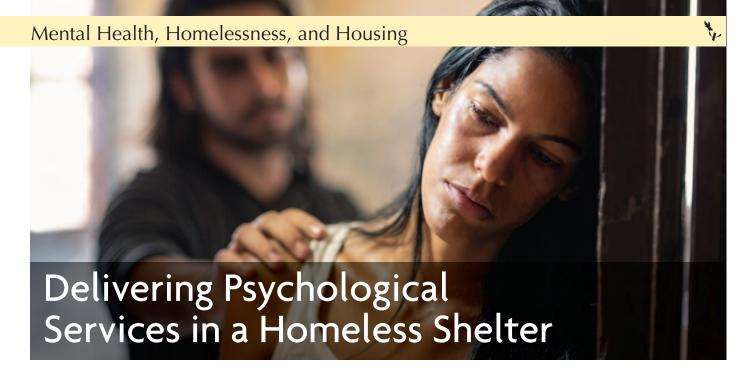
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Interview with Susan Farrell, Ph.D., C.Psych.

Susan Farrell is a clinical psychologist on the Psychiatric Outreach Team, Community Mental Health Program, The Royal (Ottawa, ON). Since 2002, her clinical practice has involved the delivery of psychological services with the homeless or vulnerably housed population – working as a psychologist directly in shelters, drop-in centres, an HIV program within a community health centre, meal programs, and rooming houses.

Susan is also the Clinical Director of the Community Mental Health Program, and has oversight for the multi-disciplinary services of the Psychiatric Outreach Team in Ottawa shelters and with 40 additional community partners that serve homeless or vulnerably housed persons.

Susan maintains an active research and evaluation practice in the area of homelessness, most notably as a member of the national REACH3 (Research Education Alliance on Canadian Homelessness, Housing and Health) and was part of a national CIHR-funded project to examine homelessness in Vancouver, Toronto and Ottawa.

The following is an excerpt from an interview with Susan about her practice as a psychologist in homelessness.

It is not very common to see a clinical psychologist practicing in a homeless shelter. What exactly do you do there?

Working directly in shelters and community agencies is very rewarding. There is a significant focus on assessment, usually cognitive and psychodiagnostic. I also do a lot of consultation to shelter or case management staff in relation to behavioural and engagement approaches with persons I have assessed and help educate them on mental health and effective approaches within their roles. At times I have done short-term intervention with individuals and families.

Are you able to do the work of a psychologist directly in a shelter?

Most definitely. There are quiet offices and community staff are always very generous to share space. In conducting an assessment, the same testing conditions (table, lighting, etc.) have to apply in a shelter as in a hospital or any other setting. In fact, most shelter staff are so used to me now, even they know the conditions that I require!

The portrayals of many homeless people in the media would suggest that they are using too many substances to participate in a meaningful way in psychological services. Is this true?

Reported rates of substance use are higher in the homeless population than the housed population; however, not all people who are homeless are actively using substances and many are in treatment for substance use. This is closely monitored before an assessment begins. For those who are using, there are opportunities to speak with them (at the right time) about their use and to start examining opportunities for change. Most services use a non-judgemental harm reduction approach, so I also use this approach within the delivery of psychological services.

Why deliver services directly in shelters?

Our Psychiatric Outreach Team works with individuals who are usually quite disconnected from the health system, especially the mental health system. To ask individuals who have come to a shelter to then come to another office for psychological services renders the service rather inaccessible. Instead, by having a consistent presence in the shelter and by building relationships with agency and shelter staff, individuals are more likely to come to meet me. I have given many staff a script to talk about what to expect in meeting a psychologist and then I review this and the limits of confidentiality when we first meet. This process supports strong engagement with individuals receiving psychological services.



Are there ethical issues in your practice with homeless individuals?

Practice in community settings, including homeless shelters, requires additional reflection about the application of our Canadian Code of Ethics and our professional standards. Despite the uniqueness of the practice setting, all of the same tenants of the code and the professional standards still apply. One of the most significant challenges for my psychology residents and practicum students is confronting the disparity in circumstances between themselves and their clients. This is certainly an ongoing reminder of inequity in our society and our need for national action to address housing and health. This is one of the key impetuses to my research and evaluation work with the population.

You take students to work with you in the shelter?

Yes, at all levels of training, although assigned tasks differ based on the student's experience and skills. It is critical that students are exposed to the delivery of psychological services in alternate settings, such as homeless shelters and community agencies, within their training. It is an invaluable way to teach them about the diversity of application of the skills of a psychologist. In fact, in our Psychology Pre-Doctoral Residency Program, we require residents to complete an assessment in a community setting, for this exact reason.

Is there anything else you would like to add?

It is one of my great professional privileges to work with, and learn from, persons who are homeless with mental health challenges. Homelessness and vulnerablehousing (those living in significant poverty due to housing cost or condition) offers a rich arena for the involvement of psychologists. Pat O'Neill said this well during his tenure as CPA President, and Tim Aubry and others demonstrate this in their programs of research. For me, the opportunity to be a scientist-practitioner in the field, deeply immersed in both research and practice (and advocacy) is a rewarding application of all of my skills as a psychologist.





Shrinking the distance between Isolation and Opportunity: Community Engagement in Mulgrave Park

Valerie Shapiro, MSW, Director of Community Programs; Maurice James, Phoenix Youth and Community Centre Coordinator; and Carla Sheppard, Community Outreach Worker, Phoenix Youth and Community Centre

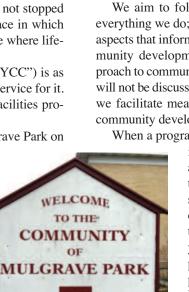


The community of Mulgrave Park in Halifax is unique, diverse, and welcoming. Created as "residual housing" in the 1950s, it is the largest social housing community in Nova Scotia. The residents are primarily of African, Nova-Scotian decent. The community was originally designed to be temporary housing only and was not intended or built to support long-term stable residency. As a result, the Mulgrave Park community has faced substantial challenges and barriers both socially and economically. However, these challenges and barriers have not stopped families from making "the Park" their home; a place in which everyone is safe, a place to be proud of, and a place where lifelong friendships are created and valued.

The Phoenix Youth and Community Centre ("PYCC") is as much a part of the community as our program is a service for it. PYCC is housed within Mulgrave Park itself, in facilities provided by the Metro Regional Housing Authority.

Africentric theory informs our practice in Mulgrave Park on

every level. Africentricism "stems from the strong expressed desire by members of African Canadian communities to have a greater voice, and indeed control, in conceptualizing, developing, implementing, and monitoring programs that address the unique needs of African Canadians. Underlying this position is the belief that without greater control over the types of programs and services that are developed and delivered, African Canadians will continue to be confronted by the same social and economic issues" (Este & Bernard, 2003, p. 319).





Each of our programs, events, and educational opportunities are planned, coordinated, and informed by the community. We have put in the effort and time it takes to build a trusting relationship within Mulgrave Park, with profoundly positive results. By carefully collaborating, consulting with, and listening to the identified needs of the community, we have been able to both identify and respond to the service gaps that exist. Our relationship with the community is facilitated by hosting monthly Community Advisory meetings; employing a Community Facilitator (a position designated for a Mulgrave Park resident); connecting and building relationships with parents; and by being a predictable, accountable, and consistent service provider.

We aim to fold the Africentic theoretical perspective into everything we do; however, we have three equal and interacting aspects that inform our overall practice: Africentric theory, community development, and intentional programming. Our approach to community development and intentional programming will not be discussed explicitly in this article but does inform how we facilitate meaningful programming that fosters youth and community development and leadership.

When a program such as ours puts in the effort to build trust

in a community, the impact can be immeasurable. Through the investment of time, patience, and process we have succeeded in shrinking the distance between isolation and opportunity. In the last year, we bore witness to numerous examples of achievement, from young people creating an anti-stigma campaign for their community, to having the opportunity to personally interface with the Premier of Nova Scotia. The young people of Mulgrave Park break down barriers at every

Please see page 16





Julie L. Wershler & Scott T. Ronis, Department of Psychology, University of New Brunswick

The Issue of Hidden Homelessness

In Canada, youth make up a significant proportion of the homeless population. Estimates indicate that one in five homeless individuals is under the age of 18 years (Gaetz, Donaldson, Richter, & Gulliver, 2013), which equates to approximately 65,000 youth experiencing homelessness every year (Raising the Roof, 2009). Furthermore, because it is difficult to identify individuals who have unstable or transient living situations and who are not accessing services (e.g., shelters), these official estimates likely underestimate the true prevalence of youth homelessness. In fact, it has been suggested that three times as many individuals experience this type of "hidden homelessness" (Gaetz et al., 2013) than conventional forms of homelessness.

Recently, we investigated the psychosocial characteristics and service needs of male youth at risk for homelessness in an Atlantic Canadian suburban community (Fredericton, New Brunswick), and discovered that 51% of the 187 participants had experienced homelessness at some point in their life (Wershler & Ronis, 2015). The vast majority of these individuals had not lived on the streets or in a shelter; in fact, only 7% reported having ever accessed shelter services (Wershler & Ronis, 2015). Rather, youth frequently engaged in "couch surfing," or staying with a variety of friends or family members on a temporary basis. Given that homelessness is so often of a hidden

nature, particularly away from large, urban centres, the severity of the problem can often be masked. It may also impact the ability of youth to receive services to address their needs.

Service Needs of Homeless Youth

Previous research has identified a broad range of problems among homeless youth, such as family discord and traumatic experiences (Edidin, Ganim, Hunter, & Karnik, 2012). Indeed, in our study, participants endorsed high levels of mental health symptoms (i.e., disruptive behaviour, depression, anxiety), substance use, engagement in antisocial activities (e.g., theft, assault), poor family relationships, academic difficulties, low self-esteem, and histories of abuse or neglect (Wershler & Ronis, 2015).

Despite the significant and varied needs of homeless youth, service use was low, with youth reporting use of only one service, on average, even when they had experienced homelessness (Wershler & Ronis, 2015). Previous research has also indicated that the services youth receive are not sufficient to meet their varied needs (Kort-Butler & Tyler, 2012). Within smaller urban areas or in more rural settings, there is often a lack of specialized services (e.g., youth shelters, drop-in centres) for homeless youth, likely contributing to lower rates of service utilization. In addition, youth often report difficulties accessing services or a lack of knowledge about available services (Pergamit & Ernst, 2010).

Please see page 16

Mental Health, Homelessness, and Housing



Hidden Homelessness and Service Needs Among Male Youth:

Implications for Service Provision

Continued from page 15

In our study, one-quarter of participants expressed having experienced some form of difficulties, and many others indicated that they had not attempted to access services due to perceived barriers (Wershler & Ronis, 2015). Examples of such barriers included long wait times, age restrictions (often services are for younger children or adults), limited resources of organizations, lack of knowledge about how to access a service, or complicated processes for access (e.g., paperwork, referrals).

Implications for Service Development and Implementation

The high rates of "hidden homelessness" and the diverse service needs of homeless youth have important implications for organizations and professionals serving this population. Youth appear to prefer services that they can easily and quickly access when needed (e.g., shelter or temporary housing services, drop-in counselling) (Wershler & Ronis, 2015; Pergamit & Ernst, 2010). These services should ideally serve a "gateway" function by assisting youth in accessing additional services to address individualized needs. Youth drop-in centres can play such a role by providing a place for youth to go that can address more basic physical (i.e., shelter, food, clothing) and recreational needs, as well as facilitating access to more specialized services when required (e.g., mental health or addictions treatment, family therapy).

Addressing multiple areas of need is preferable, particularly needs that are causally related to the youth becoming or remaining homeless (Slesnick, Dashora, Letcher, Erdem, & Serovich, 2009). Collaboration and coordination between service providers is also critical to ensure that youth can access a comprehensive array of services. The most effective services are those that are individualized to match the needs of the youth (Edidin et al., 2012) and that are tiered based on the context of the youth's life. For instance, a youth residing in a shelter may require assistance in meeting basic needs, whereas a youth couch-surfing at homes of friends may primarily want help securing employment to save money for more stable living arrangements.

Overall, a continuum of services would include: 1) prevention efforts with youth who may not be homeless but for whom various factors put them at risk (e.g., family conflict, criminal justice system involvement, substance use); 2) interventions to meet basic needs for youth who are homeless; and 3) interventions to address causal or maintenance factors that may have contributed to youth becoming or remaining homeless. Prevention-based services may include family therapy to reduce significant conflict in the home; access to services such as shelters and food banks to address basic needs; and trauma-based intervention or employment skills training may to help address causal or maintenance factors. By employing such services, it may be possible to assist youth avoid or transition out of homelessness.

For a complete list of references, please go to www.cpa.ca/psynopsis

Community Engagement in Mulgrave Park

Continued from page 14

turn. PYCC aims to help youth realize their potential, but it is the youth themselves who are reaching their goals and making their dreams a reality.

By way of example, youth led "Spread the Love," an antistigma initiative where they descended on the community dressed in bright shirts and gave out positive notes affixed to candies. Youth wanted the opportunity to share something positive about their community with the city of Halifax, and thereby reduce the stigma and fear associated with Mulgrave Park. As one youth said, "if the community doesn't yet have something positive to say about us, let's give them something positive to say!" PYCC provided the platform and the youth did the rest in terms of event planning, organizing, and execution. Local media picked up the story, the Mayor came out to greet the youth, and each community member with whom they interacted left with a smile stretching from ear-to-ear. Changing public perception is no easy feat, but this demonstrates the profound impact that empowered young people can have when they are well supported.

Creating opportunity allows youth to access and influence environments otherwise denied to them. A recent example occurred at our Centre when the Premier of Nova Scotia, the Honourable Stephen McNeil, came to visit. Through this interaction both our youth and our Premier were given the opportunity to learn from, listen to, and influence each other. The impact of this visit was evident when the Phoenix Community Choir performed at the Legislature during the Order of Nova Scotia Investiture Ceremony. Upon entering the reception room, one youth who had not only met the Premier during his visit, but had also had subsequent correspondence with him, noticed all the elaborate photos of previous Premiers of Nova Scotia and said, "I am going to hit two birds with one stone. I am going to be the first woman on this wall, and I am going to be the first black person on this wall." We all believe her. She is a leader in her own right, with ambition and intelligence, and with the right opportunity and support there is no limit to what she can achieve. We believe that this is true for each and every youth living in Mulgrave Park.

Our approach, has led to informed, relevant community engagement in Mulgrave Park. Engaging youth within their community, their school, other organizations, peer groups, and families in a manner that is productive, constructive, and culturally-relevant is a best practice in community work. We are able to recognize and develop strengths in each individual, promoting positive outcomes for individuals and providing opportunities for youth and their community. We hope that the work we have done together with the youth of Mulgrave Park will be a model of success for other communities that can help marginalized youth break through barriers and achieve great things.



Profile of HHiT study findings:

A Longitudinal Study of the Health and Housing Transitions of Homeless and Vulnerably Housed Adults in Three Canadian Cities

Rebecca A. Cherner, Susan Farrell, Stephen Hwang, Tim Aubry, Anita Palepu, Rosane Nisenbaum, Anita M. Hubley, Fran Klodawsky, Evie Gogosis, & Matthew J. To

Although homeless adults have poorer physical and mental

health than the general population (Frankish, Hwang, & Quantz, 2005), there is limited understanding of the interactions between health and housing over time among individuals who are homeless in Canada. The Health and Housing in Transition (HHiT) study, funded by CIHR, seeks to better understand housing transitions, risk factors and resources that affect attaining and losing housing, and the association between health and housing in homeless and vulnerably housed1 adults (Hwang et al., 2011). Researchers followed 1,190 participants in Ottawa, Toronto, and Vancouver from January 2009 to April 2014 and interviewed them annually over a four-year period.

Three papers from the HHiT study provide information on the mental health functioning of homeless and vulnerably housed adults, their unmet men-

tal health needs, and traumatic brain injury (TBI).

Both homeless and vulnerably housed participants endorsed a low level of mental health functioning at recruitment (Hwang et al., 2011). Homeless participants reported lower mental health functioning than the vulnerably housed group. Over half of the sample (51.7%) reported having ever received a mental health diagnosis (Hwang et al., 2011).

In addition to having poor mental health, the mental health needs of many participants were not being addressed adequately. Almost a quarter (23.5%) of participants reported they had unmet mental health needs within the past year (Palepu et al., 2013). Factors associated with unmet mental health needs included drug use, being homeless at recruitment, having three or more chronic health conditions, and having received a mental health diagnosis.

Over half of the participants (60.8%) reported a lifetime history of traumatic brain injury (TBI) (To et al., 2015). Having a history of TBI was associated with having more lifetime years of homelessness, lower physical and mental health functioning,

having a chronic health condition, having received a mental health diagnosis, and having a positive screen for drug and alcohol use problems. TBI was also independently associated with emergency department use, being arrested or incarcerated, and being physically assaulted during a one-year follow-up period.



The HHiT study is a unique cohort of individuals with a history of housing and health problems who are living in extreme poverty in large Canadian cities. Early findings suggest that individuals who are homeless or vulnerably housed experienced poorer mental health and unmet mental health needs. TBI was also common among study participants and was associated with negative outcomes. Future papers from the HHiT study will explore gender differences in the mental health of the homeless participants, a comparison of the health of Indigenous participants and non-Indigenous participants, the quality of mental health care received by participants, predictors of entering and exiting homelessness, and longitudinal trajectories of housing status and their relationship to health service use.

Contributors: Elizabeth Hay, Shannon Pidlubny, Tatiana Dowbor, Christine Chambers

¹ Vulnerably housed adults included individuals who had their own place AND had been homeless in the past year and/or had two or more moves in the previous year



Examining Health Literacy Levels in Homeless Persons and Vulnerably Housed Persons with Mental Health Disorders



Susan Farrell, Ph.D., C.Psych. and Michael Dunn, M.Sc. The Royal and Canadian Mental Health Association (Simcoe County Branch)

Health care use is high in persons who are homeless and vulnerably housed, but their health literacy is often not known. Health literacy can be defined as the degree to which an individual can obtain, process, and understand the basic health information they need to make appropriate health decisions (The Centre for Literacy of Quebec, 2006; Speros, 2005). Often health literacy is assumed and health information is written above an 8th grade level (Holgrem et al., 2001). Vulnerable populations, particularly homeless persons, are at risk of limited health literacy leading to potential health implications (American Medical Association, 2002; Fetter, 2009).

The purpose of this study was to determine health literacy rates in a Canadian population of homeless and vulnerably housed (those with unsecure housing due to income) individuals with mental health disorders. Using a population survey design, interviews were conducted with 192 participants served by one of three community-based mental health team models: Outreach, Assertive Community Treatment, and Step-Down. These

teams serve people with severe and persistent mental health disorders in homeless shelters or other types of housing. Health literacy was measured using the REALM (Rapid Estimate of Adult Literacy in Medicine), a 66-item questionnaire assessing ability to read health-related words. The study found a significant difference between assessed health literacy and self-reported literacy for all participants. Higher levels of health literacy were associated with being housed, higher levels of education, non-psychotic mental health diagnoses, and lower levels of drug use. This suggests that health literacy may be a potential barrier for accessing and utilizing health services and information for vulnerable populations. With 24% of participants reading at or below an 8th grade level, health literacy should be a consideration in the design of printed health materials particularly, for services targeting individuals who are homeless or living with a psychotic illness or substance use disorder. Future research will need to focus on the comprehension of health-related topics (rather than single health words) and the relationship to health-adherent behaviors.



Housing First for Canada's Homeless with At Home / Chez Soi: Reflections from the Mental Health Commission of Canada

Louise Bradley, President and Chief Executive Officer, Mental Health Commission of Canada

It's perhaps not surprising that a psychologist, Dr. Sam Tsemberis, is credited with re-defining how we approach the complex issue of ending homelessness among people living with serious mental health problems and illnesses.

While working in New York City, Tsemberis hit on a simple, yet revolutionary solution to this pressing societal issue. After speaking with countless people living on the streets with mental health problems, Tsemberis ascertained that requiring people to "earn" a safe and secure place to live by entering treatment first, just simply wasn't working.

In an effort to approach a difficult challenge with an eye to innovation, he turned the existing process on its head. The Housing First method offers a person a home as the initial step on their journey to recovery. It is followed by access to appropriate treatments and supports. It has become a veritable gamechanger.

Those of us who have worked on the frontlines of care provision for people with mental health challenges shouldn't be terribly surprised that turning the status quo upside down would yield such positive results. When I was working as an RN in mental health, time and again we saw patients, treated them, and sent them out into the world – a world in which they didn't have the security of a home to call their own. It's not so shocking that they'd be back in short order.

In Canada, estimates suggest that as many as 235,000 people are homeless in any given year (Gaetz, Fulliver, & Richter, 2014). While the factors influencing a person's trajectory to homelessness are disparate and diffuse, mental health problems put people at greater risk for homelessness (Gaetz et al., 2014), and, in a true catch-22, being homeless can exacerbate or cause mental health issues (Gaetz, Donaldson, Richter, & Gulliver, 2013). Living without a home is stressful and unsafe. It has a negative impact that goes beyond the individual, and extends to society as a whole.

Emily Grant, an At Home participant in Vancouver, sums it up. Being homeless, she says, is "absolutely horrible, totally horrible."

In general, Canada's approach to addressing homelessness has been crisis-driven, which translates to costly options like emergency rooms and the justice system. Homelessness costs the Canadian economy roughly \$7 billion every year (Gaetz et al., 2013). Even more distressing, in many Canadian communities, homelessness is on the rise.

It is within this context that the Mental Health Commission of Canada was entrusted to oversee the Federal Government's investment of \$110 million to study the Housing First model in a Canadian context. At Home/Chez Soi, the largest research demonstration project of its kind in the world, brought together

researchers from across the country, including nurses, doctors, psychiatrists and many of Canada's best community psychologists, to create and implement groundbreaking research.

Over five years, and within five unique Canadians cities, At Home/Chez Soi quickly stabilized housing, reduced the use of emergency measures (hospitals, shelters, outpatient visits) and improved lives (Goering et al., 2014). Crucially, each pilot city was selected on the basis of size, location, and one other determining factor. These ranged from the complex needs of Aboriginal Canadians in Winnipeg, to a population with diverse ethno-cultural backgrounds in Toronto, to the complicating factors of substance misuse in Vancouver. Given that At Home was successful within each of these unique communities, the argument for its effectiveness holds true, regardless of a city's geographic location or population make-up.

Over the course of the study, participants in Housing First spent an average of 73 % of their time in stable housing, compared with 32 % of those in "treatment as usual" (Goering et al., 2014).

It was a privilege to lead the MHCC during this tipping point. Housing First is an important tool; it costs less than traditional approaches, and has better outcomes. As a country, we cannot afford to discount this path going forward. This is true, both literally and figuratively.

Housing First proves to be a sound investment. For individuals with high needs, a \$10 investment yields a savings of \$9.60. Among the 10 % of the population with the most significant costs at entry, every \$10 invested saved \$21.72 (Goering et al., 2014).

In addition to the hard numbers, the program itself gives participants a dignity and hope that is beyond measure. One At Home participant puts it like this: "To this day, I feel I'm in control," he says. "Health-wise, mind-wise, I'm getting back. I can't see a single negative side to this. I'm ready to go back to work."

Fortunately, this message is reverberating within communities from coast-to-coast, and we are seeing the implementation of effective supportive housing and Housing First programs.

As a result of At Home, the Federal Government's Homeless Partnering Strategy invested \$600 million over five years in Housing First. But of course, as psychologists will attest, housing alone is not the solution. Housing has a key role to play, but for those living with mental illness, a range of individualized, recovery-oriented services are necessary to successfully maintain that housing. Ultimately, Housing First tells us that, as a society, we must work collaboratively if we wish to see success. Partners in the shape of clinicians, nurses, peers, housing workers, police services, physicians, psychiatrists, and psychologists all have an integral role to play.

Please see page 21



Advocacy is Therapy:

Why Moving Beyond an Individualized Approach is Critical to Effective and Ethical Practice

Alison Little, MSW, Melodie Skeete, MSW, Rachel Derocher, MSW, Fiona McAdam, MSW. Phoenix Prevention Program, Halifax, Nova Scotia.

The Phoenix Prevention Program (PPP) is the clinical therapy component of a continuum of services offered at Phoenix Youth Programs in Halifax, Nova Scotia.

Susan was a client who came to the PPP for therapy. She gave us permission to share her story¹ to highlight the importance of understanding the context of clients' lives, to move beyond the tendency in the therapeutic world to locate problems within individuals, and to understand that advocacy *is* therapy.

Case Example

Susan was a seventeen year old girl who struggled with anxiety. She had previous counselling that focused on coping skills and changes to her thinking. Following the therapy, Susan experienced an increase in the anxiety and had at least two panic attacks. She was reluctant to re-engage in counselling.

Within the first couple of sessions at the PPP Susan disclosed that her family was living in poverty. She was helping to pay all of the bills and supporting her mother and sister through a full time job. Susan was an impressive young woman, in grade twelve, often working twelve to fourteen hour days while being home-schooled. She explained that her mother had mental health challenges and only a small unreliable income. Her mother had previously applied for welfare but felt she had been treated dismissively and was denied assistance. Susan was feeling guilty about the extent to which she felt burdened and overwhelmed. She was convinced that she had an anxiety disorder and wondered if she needed medication.

Susan spoke about her dream to become a chef and attend culinary school but she felt this dream was out of reach due to poverty.

As therapists, we need to develop contextual competence (Fook, 2003). Considering the context in which a client's problems exist, and advocating for change, is integral to effective, ethical, responsive, social justice-oriented therapy. In our work at the PPP we pay attention to the complex situations that affect client's lives.

Acts of advocacy are powerfully therapeutic when advocacy honours the complexity of clients' lives, defines the problem as separate from the client (White & Epston, 1990), and addresses contextual challenges. Advocacy is even more therapeutic if the



client experiences the therapist as an ally with power to advocate for needed change to their environments.

Since we know that the quality of the therapeutic alliance is the single most important factor toward a positive outcome in therapy (Horvath & Symonds, 1991), it makes sense to incorporate therapeutic advocacy as a central component. Our experience has shown us that an effective way to strengthen the therapeutic alliance with clients is through asking specific questions about the details of their lives. When a client's problems are assessed separately from their socio-economic and cultural contexts, important underlying contributors are ignored and the client is left to understand themselves as deficient (Waldegrave, 2005).

In our case example, a strong therapeutic alliance was developed with Susan as she and her therapist unpacked the reality of her life. Once her therapist understood that Susan and her family were living in poverty, the anxiety was discussed against this backdrop and the meaning of it changed. The immediate suffering brought on by the anxiety was not ignored. Susan learned about mindfulness and relaxation techniques. She and her therapist discussed the ways in which the anxiety was affecting her life and how Susan could take back control from its presence. However, Susan's therapist didn't see her solely through the lens

¹ Name and identifying information changed to protect confidentiality



of an anxiety "disorder." Instead, she viewed Susan as a resourceful, resilient, and remarkable young woman who was living in, and was rightfully anxious about, an untenable situation. She understood that Susan was worried about very real and adult things like how to pay the bills, buy food, and keep the heat on.

In contrast, Susan spoke of experiencing little or no therapeutic alliance when in previous therapy, where she was told that she had a disorder and distorted thinking. She was not asked about the context of her life. No inquiry was made about details of her daily struggles. This decontextualized approach left her feeling that she was deficient and to blame for not functioning or adapting well.

Asking people to adapt to and cope with their environments without addressing the social context runs the risk of perpetuating social injustice (Ratts, 2009). Problems cannot be understood solely by assessing behavior and cognition, and expecting change to come only from within the client. Contextual curiosity and competency is an ethical responsibility that requires therapists to advocate with and for clients. Acknowledging the presence of poverty in Susan's life and connecting Susan and her family to resources and supports were core components of her therapy. Advocacy was critical to the process; not an "add on" service that would typically be relegated to other helping professionals (Lewis, Ratts, Paladino, & Toporek, 2011).

Susan began to understand the anxiety as a normal response to a very stressful situation when the focus of therapy shifted to addressing the family's lack of income and deconstructing the shame that Susan felt about it. A respectful working alliance was formed with Susan's mother, who over the course of several sessions was open to allowing the therapist to support her in re-applying for income assistance. The successful application to welfare alleviated some of the financial burden on Susan that was feeding her anxiety. This made space for her to focus on her educational and career aspirations.

Susan and her therapist discussed her dreams for the future. Together, they applied for scholarships offered by supporters of Phoenix Youth Programs. Susan subsequently graduated from culinary school at the top of her class. She won awards in culinary competitions and is now working in a highly regarded restaurant.

Unpacking, honouring, and collaboratively acting upon the contexts of clients' lives is an ethical responsibility that is rooted in social justice principles. This approach lends itself to the establishment of a strong therapeutic alliance and can contribute to effective and long-term change. Typically clinicians are afforded little time in their practice to advocate. We argue that it is a critical time-saving measure in the long run (Ungar, 2011). When Susan's problem with anxiety was discussed as only internal, there was no lasting decrease in the anxiety. When the problem was rightfully situated in Susan's socio-economic context, steps were taken to address barriers and advocate for change that extended well beyond the therapy room. As a result, Susan experienced a significant decrease in anxiety and an increase in overall feelings of wellness and competency.

As therapists at the PPP, we incorporate advocacy in our clinical practice, firmly believing that it is an ethical, effective, and critical component of all therapy.

For a complete list of references, please go to www.cpa.ca/psynopsis

Reflections from the Mental Health Commission of Canada

Continued from page 19

So while At Home/Chez Soi takes a Housing First approach, it's a far cry from "housing only." That's why it's a program that needs advocates and champions across jurisdictions. Building our capacity to deliver recovery-oriented, Housing First services is a vital component to any effective system of health and social services. To further its uptake, the MHCC has invested in a two-year training and technical assistance program that is providing hands-on training in 18 communities. To date, more than 1,400 people have benefitted from this training, which includes a CIHR-funded research evaluation. A supplementary online tool kit has spread the net even wider and can be found at www.housingfirsttoolkit.ca. We are also continuing to learn about longer term outcomes through four-year, follow-up studies in all of the sites.

It's heartening that we are continuing to see a growing appetite for Housing First training, which is why we are working to ensure that the support provided through training and technical assistance continues beyond the Commission's involvement, which ends in March of 2016. We are working with national partners to ensure continuation of the exceptional Housing First Training and Technical assistance program.

Our role at the MHCC is to act as a catalyst, sparking real and lasting change with pan-Canadian solutions to pressing mental health challenges. At Home/Chez Soi is an example of an innovative project we were able to seed, before entrusting its continued growth to key partners well-positioned to ensure it flourishes.

As Dr. Geoff Nelson, a lead researcher with At Home and a professor with the department of Psychology at Wilfred Laurier University, puts it, "The Housing First approach, and the At Home/Chez Soi research demonstration project on this approach, is a shining example of how psychology, in collaboration with other disciplines, can contribute to the development of innovative evidence-based social policy that improves the lives of some of the most vulnerable Canadians."

On a personal level, I often wonder about how the outcomes for my patients may have been different if Housing First had been an option all those years ago. You are fortunate to be working in the field at a time when you can witness these positive outcomes first-hand. It is my fervent hope that you will use your influence to encourage its uptake and voice your support within your local community and beyond.

Head Office Update



Karen R. Cohen, Ph.D., C. Psych, Chief Executive Officer and Lisa Votta-Bleeker, Ph.D., Deputy CEO and Director, Science Directorate

What follows is an update of activity undertaken by CPA Head Office staff and leadership since the Fall 2015 issue of *Psynopsis*. For further information about any of the activities described, please contact us. We want to hear what you think!

Unless otherwise indicated, please contact:

- Dr. Karen R. Cohen (kcohen@cpa.ca) practice
- Dr. Lisa Votta-Bleeker (lvottableeker@cpa.ca) science
- Dr. Stewart Madon (smadon@cpa.ca) accreditation and ethics
- executiveoffice@cpa.ca public affairs and government relations, continuing professional development

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• membership@cpa.ca – membership and benefits

STAFF COMPLEMENT

There have been some changes to our Head Office complement since our last update. In October, we welcomed Dr. Stewart Madon as Registrar, Accreditation and Ethics Officer, and in November, we welcomed Mr. Seán Kelly as Director, Events, Membership and Association Development. We also extended the contract of Mr. Matt Murdoch, Assistant, Research, Membership and Education. Ms. Meagan Hatch, Director, Public Affairs and Communication, will take maternity leave in February 2016; during her leave CPA will engage the services of a public affairs firm to maintain our advocacy momentum for science and practice. Communications functions continue to be the responsibility of Communications Coordinator, Stephanie Miksik (smiksik@cpa.ca). In September, Ms. Amy Barnard resigned from her position as Manager, Practice Directorate (PD); this position supports the practice-related issues and needs common to provincial and territorial associations of psychology. Pending Board review and decision-making, CPA anticipates staff recruitment in early 2016.

MEMBERSHIP

As part of its 2016 annual membership renewal campaign, the CPA was pleased to launch its new membership renewal and application system in mid-October. The new membership system has improved features that make renewing your 2016 membership and accessing/updating your information much easier. The new system also simplifies the application process for new and returning members.

KNOWLEDGE TRANSFER AND EXCHANGE

Call for Submissions – Psynopsis. The Spring 2016 issue of Psynopsis magazine – Canada's Psychology Magazine, will be devoted to Recovery and Guidelines for Recovery-Oriented

Practice. We invite researchers and practitioners to submit articles looking at this issue. Please submit 400-900 words to psynopsis@cpa.ca. Please note that submissions may be edited with the author's consent. If you have ideas for Psynopsis themes, please contact its Editor-in-Chief, Dr. Karen Cohen (kcohen@cpa.ca). Psynopsis is an important vehicle for knowledge transfer and translation, as well as advocacy. Please consider making a submission!

Canadian Psychology Graduates Survey. At CPA's 2013 Summit on Supply, Need and Demand of Psychologists in Canada, participants learned about the knowledge gaps created by the cancellation of key Statistics Canada's surveys (University and College Academic Staff System, Survey of Earned Doctorates, Mandatory Long-Form Census). In response to an identified need to collect data on Canada's psychology graduates and address this knowledge gap, in 2014/15 the CPA developed a survey to collect this data. The CPA conferred with the APA and obtained their permission to modify and use the APA's Doctoral Employment Survey for the Canadian context. The survey was designed to produce a minimum dataset with a limited number of questions tagged as mandatory. The survey launched in April 2015 and closed on December 1, 2015 with 5,864 total responses. It called upon everyone across the country that has ever completed a terminal master's or doctoral degree in any area of psychology to complete the survey. A final report of the overall survey results will be compiled and posted on CPA's website.

Knowledge Mobilization Summit. On Thursday November 12, 2015, the CPA hosted a one-day summit on knowledge mobilization. The summit was organized in direct response to feedback from members who had expressed concern about not knowing what funders are looking for in terms of the knowledge mobilization components of grants. We secured representatives from CIHR, SSHRC, NSERC and the NCEs to speak about this specific topic from the "funder" perspective, as well as a number of speakers with known success in implementing knowledge mobilization plans. Slides from the presentations and a proceedings report will be posted on the CPA's website.

CPA's 2016 Annual Convention. Planning is well underway for CPA's 77th Annual Convention, which will take place in Victoria, BC from June 9-11, 2016 (http://www.cpa.ca/Convention/). The deadline for submissions was December 1, 2015.

Confirmed plenary speakers are 1) Dr. Kevin Kelloway, CPA President; Canada Research Chair in Occupational Health Psychology, Saint Mary's University; 2) Ms. Mary Walsh, CPA Honorary President; actress, comedian, political satirist; 3) Dr. Terence Keane, Professor and Vice-Chair, Department of Psychiatry, Boston University School of Medicine; world leader in the field of traumatic stress; and 4) Dr. Julian Barling, Borden Professor of Leadership, Queen's School of Business. Join up to 1,500 of your colleagues at the Convention to renew your excitement about the work you do, have your voice heard, meet colleagues face-to-face, gain access to experts in the field, and celebrate excellence and achievements.



Fact Sheets. A number of new fact sheets have been posted to CPA's website: Coping with Cancer in Adults, Gender Dysphoria in Children, and Bullying in Children. Three additional fact sheets have been submitted and are being reviewed. Members are welcome to submit a fact sheet or suggest a topic via email (factsheets@cpa.ca).

CPA Journals. As part of a new initiative to better promote Canadian psychological science and research and incite media attention, CPA is drafting press releases on some newly published articles from its three journals. The inaugural issue for this initiative was a literature review—"ADHD in Schools: Adopting a Strengths-Based Perspective" co-authored by Dr. Emma Climie and Dr. Sarah Mastoras and published in Canadian Psychology/Psychologie canadienne, Vol 56(3), Aug 2015, 295-300.

Canadian Psychology invites the submission of manuscripts for all issues, but also for an upcoming special issue - *Canadian Psychology: Opportunities and Challenges*. The deadline for submissions is February 15, 2016. Please visit http://www.cpa.ca/docs/File/Publications/Call_for_papers-CanadianPsychology.pdf for more information.

International Congress of Applied Psychology (ICAP) 2018. Planning continues for ICAP 2018, which CPA will host in Montreal, QC from June 26-30, 2018. ICAP's co-Presidents are Drs. Peter Graf and David Dozois. The theme for ICAP 2018, Psychology: Connecting Science to Solutions, was chosen to highlight the thriving partnership between science and practice and to extend a warm invitation to both scientists and practitioners.

The CPA's 79th Annual Convention, including Section Business Meetings and programming, will take place as usual within the ICAP schedule. CPA Head Office staff are playing integral roles in the planning of this event, serving as Chair or members of various organizing committees. The CPA will be working with MCI Canada to make this a singular experience for CPA members, IAAP members, and non-members alike. Be sure to check CPA's website regularly for more information: www.cpa.ca/icap2018 and follow ICAP2018 on social media (#ICAP2018).

GOVERNMENT RELATIONS, ADVOCACY AND OUTREACH

Election 2015. As part of its preparation for the federal election held on October 19, 2015, the CPA launched an advocacy campaign that included: drafting letters, requesting meetings with the political parties, implementing a letter-writing campaign to help members contact their candidates, and sending a short questionnaire to the headquarters of each national political party asking about investments in mental health services and research funding. CPA also participated in a Hill Times health platform election event. http://www.hilltimes.com/news/2015/09/10/next-canadiangovernment-needs-to-take-federal-leadership-on-health-care-issues-say/43338

Post-election, we sent letters of congratulations to the prime minister, ministers, and other members of Parliament, taking opportunities to speak to the government's mandate with regards to health, mental health, education, and research. These include access to high quality mental health services, taxation of psychological services, affordability of post-secondary education, affordable housing, the development of a national disability act, changes to the criminal justice system and sentencing reforms, a national action plan on post-traumatic stress disorder, and mental health needs within military populations.

Post-election, we issued a press release applauding the new Government's expeditious reinstatement of the mandatory long-form census, and as a result, gave a number of radio interviews on the topic. In September, we made a submission to the Assembly of First Nations and Health Canada's First Nations and Inuit Health Branch for the joint review of the non-Insured Health Benefits program and in October, we made a submission to the External Panel on Options for a Legislative Response to Carter versus Canada (assisted dying). Many thanks are due to Dr. Keith Wilson, a leading researcher on end of life decision-making, who was the principal author on the Carter submission. Finally, in December 2015, we held our first post-election meeting with the Deputy Minister of Health.

EDUCATION AND TRAINING HIGHLIGHTS

Accreditation. As previously noted, in October, we welcomed Dr. Stewart Madon to the CPA as its new Registrar, Accreditation and Ethics Officer. Over the summer months, accreditation activity was ably managed by our Accreditation Assistant, Sarah Fletcher in consultation with the Panel Chair, CPA's CEO, and our past Registrar, Dr. Melissa Tiessen via Skype from India. The Panel met in Ottawa in October for its fall Panel meeting at which time four programs were re-accredited and one new program accorded accreditation; more information is available on the accreditation webpage. Other Accreditation activity includes a review with APA of the First Street Accord http://www.cpa.ca/accreditation/accreditation-throughoutnorthamerica/firststreetaccord. The Panel is also in the very early preparatory stages of undertaking the sixth revision of its accreditation standards and procedures.

Survey of Private Practitioners re: Internships. Our Education & Training Committee's Internship Supply and Demand Task Force is exploring ways to increase the number of accredited internship positions available to students in professional psychology in Canada. A survey was developed in mid-November in response to the suggestion that internships be developed within the private practice community to assess whether, and in what circumstance, private practitioners can envision their practice taking on students to complete the requirements for their pre-doctoral internship. The survey was closed in mid-December.

Continuing Professional Development. Fourteen pre-convention workshops were scheduled for the 2015 CPA conven-

Head Office Update



tion. Four of the 14 (Workshop numbers 1, 9, 12 and 13) were video-recorded for later access through our online learning site http://www.cpa.ca/Convention/preconventionworkshops and will be released in the coming months.

Eight pre-convention workshops were submitted for CPA's upcoming 2016 Convention in Victoria.

PARTNERSHIPS AND REPRESENTATION IN SCIENCE

Canadian Consortium for Research (CCR). CPA's Deputy CEO, Dr. Lisa Votta-Bleeker, continues to serve as Chair of the CCR, which hosted its 4th annual breakfast with the funders on Wednesday December 9, 2015 at CPA's Head Office. Senior officers of CIHR, SSHRC, NSERC, CFI and Mitacs attended and shared their views and positions on research funding in 2015/16. Topics addressed included: funding research related operations, recruiting and retaining researchers and research leaders, the need for government to develop a roadmap for big science, creating longer research fellowships for early career scientists, the impact of an aging professoriate on recruitment, engaging the public in the research enterprise, open access, patent-oriented research, knowledge mobilization, research partnerships, and transdisciplinary research.

The research community remains concerned about the minimal increases made to the granting councils for discovery-based research, as well as the inequity in research funds across the three funding agencies. These issues, along with funding for students and Canada's larger research infrastructure, formed the basis for the CCR's 2016 pre-budget submission and election activities. The CCR sent a questionnaire to the national federal parties, posted party responses on the CCR's website in advance of the election, and issued a statement applauding the government's expeditious reinstatement of the mandatory long-form census.

Science Advocacy. Members are encouraged to inform the CPA of issues affecting psychological research in Canada.

The CPA is currently liaising with NSERC regarding a recent decision to limit the number of times an individual can apply for post-doctoral funding and CIHR regarding its deadline for applications for Banting Post-Doctoral Fellowships.

The CPA's Deputy CEO continues to send out *PSIence Update*, a newsletter devoted to profiling the activity in which the CPA is engaged on behalf of the discipline and science of psychology.

The CPA continues to liaise with Mitacs to identify means of facilitating connections between psychology graduate students and Mitacs University Business Development Officers so students can pursue applications to the Mitacs Accelerate program – internships involving industry-partners.

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PARTNERSHIPS AND REPRESENTATION IN PRACTICE

Activity October 2015 to January 2016. Note that the breadth and depth of this work and activity is significantly enhanced by the work of Meagan Hatch, our Director, Public Af-

fairs and Communications.

- October 2015 meeting of the Association of State and Provincial Psychology Boards (ASPPB), presentation to North American regulators on emergent issues for professional practice.
- October 2015 presentation to Conference Board of Canada event on better workplaces.
- October 2015 meeting with insurance broker and underwriters on renewal of CPA/CPAP professional liability insurance program.
- October 2015 teleconference with Criminal Justice Section on use of segregation in Canada.
- November 2015 meeting with Canadian Life and Health Insurance Association re: development of guidance document for health providers whose services are covered by third party insurance plans.
- December 2015 roundtable of healthcare stakeholders convened by the Canadian Federation of Nurses Unions on the future of healthcare.
- January 2016 under the leadership of its Chair, Dr. Andrea Piotrowski, CPA's Practice Directorate hosted a Leadership Conference on January 15-16, 2016 in Ottawa. This conference was directed at psychologists and students working or studying in associations, universities or hospitals who were interested in leadership and advocacy training. This interactive workshop aimed to provide key principles, strategies and practical tips for influencing decision-making bodies such as governments, regional health authorities, and universities.

Health Action Lobby (HEAL). Following six years of service, CPA's CEO stepped down as Co-Chair of HEAL, though she will continue to represent CPA at HEAL as a supportive organizational member. HEAL's agenda for 2016 will be to lobby for health system change as articulated in their consensus paper, The Canadian Way. Accelerating Innovation and Improving Health System Performance. At HEAL's December meeting, the membership received a presentation from the Public Health Agency of Canada about federal programs to support Syrian refugees. The mental health of refugees and their eligibility for 10 sessions with a psychologist was mentioned several times. Additional information and resources are available at http://www.cpa.ca/practitioners/Cultural/.

Canadian Alliance of Mental Illness and Mental Health (CAMIMH). CAMIMH met in October and addressed some staffing and strategic planning needs for which CPA offered some assistance via its Section on Industrial Organizational Psychology. CPA hopes to support CAMIMH in its post-election advocacy activity. For more information about CAMIMH activity, including the October 2015 Faces of Mental Illness, visit http://www.camimh.ca/.

Mental Health Commission of Canada (MHCC). CPA continues to sit on the MHCC suicide prevention collaborative, currently addressing research priorities. CPA also plans to contribute to the MHCC consultation on the Mental Health Action Plan for Canada early in the New Year.



Karen R. Cohen, Ph.D., C. Psych, chef de la direction, et Lisa Votta-Bleeker, Ph.D., directrice générale associée et directrice de la Direction générale de la science

Voici une mise à jour des activités entreprises par le personnel et la direction du siège social de la SCP depuis la publication du numéro d'automne 2015 de *Psynopsis*. Pour avoir des renseignements supplémentaires sur les activités décrites ici, veuillez communiquer avec nous. Nous voulons connaître votre opinion.

À moins d'indication contraire, veuillez communiquer avec :

- Dre Karen Cohen (kcohen@cpa.ca) activités touchant la pratique
- Dre Lisa Votta-Bleeker (lvottableeker@cpa.ca) activités touchant la science
- D^r Stewart Madon (smadon@cpa.ca) agrément et éthique
- executiveoffice@cpa.ca affaires publiques et relations avec le gouvernement, perfectionnement professionnel continu
- membership@cpa.ca adhésion et avantages aux membres

EFFECTIF

Depuis notre dernière mise à jour, la composition de l'effectif du siège social a changé. En octobre, le D^r Stewart Madon est devenu le nouveau registraire de l'agrément et agent d'éthique, et, en novembre, M. Seán Kelly est devenu le directeur, développement des activités, de l'adhésion et de l'organisation. Nous avons également prolongé le contrat de M. Matt Murdoch, en tant qu'adjoint, recherche, adhésion et éducation. Mme Meagan Hatch, directrice des affaires publiques et des communications, prendra un congé de maternité en février 2016; pendant son absence, la SCP retiendra les services d'une firme spécialisée en affaires publiques pour maintenir le rythme de ses activités de représentation au nom de la science et de la pratique. Stéphanie Miksik reste la coordonnatrice des communications (smiksik@cpa.ca). En septembre, Mme Amy Barnard a démissionné de son poste de gestionnaire de la Direction générale de la pratique, qui s'occupe des enjeux et des besoins liés à la pratique, touchant l'ensemble des associations de psychologues des provinces et des territoires. En attendant l'examen et la décision du conseil d'administration, la SCP prévoit de recruter du personnel au début de 2016.

ADHÉSION

Dans la foulée de sa campagne de renouvellement de l'adhésion de 2016, la SCP a lancé, à la mi-octobre, un nouveau système de demande d'adhésion et de renouvellement. Le nouveau système d'adhésion en ligne est doté de fonctions améliorées, qui facilitent énormément le renouvellement de votre adhésion pour l'année 2016, ainsi que l'accès à vos renseignements personnels et leur mise à jour. Le nouveau système simplifie aussi

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le processus de demande d'adhésion pour les nouveaux et les anciens membres.

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TRANSFERT ET ÉCHANGE DES CONNAISSANCES

Appel d'articles – *Psynopsis*. Le numéro du printemps 2016 du magazine *Psynopsis* – le magazine des psychologues du Canada – sera consacré au rétablissement et aux pratiques axées sur le rétablissement. Nous invitons les chercheurs et les praticiens à proposer des articles qui traitent de ce sujet. Veuillez envoyer votre texte (de 400 à 900 mots) à psynopsis@cpa.ca. Veuillez noter que les articles proposés peuvent être modifiés avec le consentement de l'auteur. Si vous avez des idées de thèmes pour les prochains numéros de *Psynopsis*, veuillez écrire à la rédactrice en chef de *Psynopsis*, la Dre Karen Cohen (kcohen@cpa.ca). *Psynopsis* est particulièrement utile pour le transfert et la mise en application des connaissances, et pour la défense des intérêts des psychologues. Nous attendons vos articles!

Sondage sur les diplômés en psychologie au Canada. Les participants du Sommet sur l'offre, le besoin et la demande de psychologues au Canada organisé en 2013 par la SCP ont été mis au fait des lacunes sur le plan des connaissances causées par l'abandon de certaines enquêtes majeures menées par Statistique Canada (collecte de données par l'intermédiaire du Système d'information sur le personnel d'enseignement dans les universités et les collèges, l'Enquête auprès des titulaires d'un doctorat et le questionnaire détaillé obligatoire du recensement). Pour donner suite au besoin clairement exprimé de recueillir des données sur les diplômés en psychologie au Canada et s'attaquer à ces lacunes, la SCP a, en 2014-2015, élaboré un sondage à cette fin. La SCP a discuté avec l'American Psychological Association (APA) et a obtenu la permission d'utiliser et de réviser l'enquête de l'APA sur la situation professionnelle des titulaires d'un doctorat afin d'adapter celle-ci au contexte canadien. Le sondage a été conçu pour produire un ensemble minimal de données, ainsi qu'un petit nombre de questions obligatoires. Le sondage, qui a reçu au total 5864 réponses, a été lancé en avril 2015 et a pris fin le 1er décembre 2015. Toutes les personnes, au Canada, qui sont titulaires d'une maîtrise ou d'un doctorat dans n'importe quel champ de la psychologie, étaient invitées à y répondre. Les résultats globaux du sondage seront compilés et regroupés dans un rapport, qui sera publié sur le site Web de la SCP.

Sommet sur la mobilisation du savoir. Le jeudi 12 novembre 2015, la SCP était l'hôte d'un sommet d'une journée sur la mobilisation du savoir. La mise sur pied de ce sommet émane directement des commentaires transmis par les membres, qui sont préoccupés de ne pas savoir ce que recherchent les bailleurs de fonds en ce qui concerne le volet de la mobilisation des connaissances dans les demandes de financement. Nous avions invité des représentants des Instituts de recherche en santé du Canada (IRSC), du Conseil de recherches en sciences humaines

Nouvelles du siège social



(CRSH), du Conseil de recherches en sciences naturelles et en génie (CRSNG) et des Réseaux de centres d'excellence (RCE), qui ont accepté de venir présenter le point de vue du « bailleur de fonds »; nous avons également accueilli des conférenciers reconnus, qui ont déjà mis en œuvre des plans de mobilisation du savoir. Les diapositives des présentations et le compte rendu du sommet seront publiés sur le site Web de la SCP.

Congrès annuel de 2016 de la Société canadienne de psychologie. La planification du 77° congrès annuel de la SCP, qui aura lieu à Victoria, en Colombie-Britannique, du 9 au 11 juin 2016 (http://www.cpa.ca/congres/) est déjà bien amorcée. La date limite de présentation des communications était le 1^{er} décembre 2015.

Les conférenciers des séances plénières qui ont confirmé leur présence sont les suivants : 1) Dr Kevin Kelloway, président de la SCP; titulaire de la Chaire de recherche du Canada en psychologie de la santé au travail, Université Saint Mary's; 2) Mme Mary Walsh, présidente honoraire de la SCP; actrice, humoriste, satiriste politique; 3) Dr Terence Keane, professeur et vice-président, département de psychiatrie, faculté de médecine de l'université de Boston; chef de file mondial dans le domaine du stress traumatique; 4) Dr Julian Barling, titulaire de la chaire Borden sur le leadership de la Queen's School of Business. Faites comme vos quelque 1 500 collègues qui assisteront au congrès, et réveillez votre enthousiasme pour le travail que vous accomplissez; faites-vous entendre, rencontrez vos collègues en personne, échangez avec des experts du domaine et célébrez l'excellence et les réalisations de la psychologie.

Fiches d'information. De nouvelles fiches d'information ont été publiées sur le site Web de la SCP. Il s'agit de : Coping with Cancer in Adults, Gender Dysphoria in Children et Bullying in Children. Trois autres fiches d'information ont été proposées et sont en cours de révision. Les membres sont invités à soumettre des fiches d'information ou à faire des suggestions de thème par courriel (factsheets@cpa.ca).

Revues de la SCP. Dans le cadre d'une nouvelle initiative visant à promouvoir la science et la recherche en psychologie au Canada et à attirer l'attention des médias, la SCP rédige des communiqués de presse sur certains articles récents publiés dans ses trois revues. Le premier article à faire l'objet de cette initiative est une revue de la littérature, intitulée « ADHD in Schools: Adopting a Strengths-Based Perspective », coécrite par les Dres Emma Climie et Sarah Mastoras, et publiée dans *Psychologie canadienne* (vol. 56, n° 3, août 2015, 295-300).

Psychologie canadienne sollicite des articles pour tous ses numéros, mais aussi pour un numéro spécial à venir, ayant pour thème La psychologie au Canada – Avantages et défis. La date limite pour proposer un manuscrit est le 15 février 2015. Vous trouverez des renseignements supplémentaires à l'adresse suivante : http://www.cpa.ca/docs/File/Publications/Call_for_papers-CanadianPsychology.pdf.

International Congress of Applied Psychology (ICAP) 2018. La planification de l'ICAP 2018, qui se tiendra à Montréal, au Québec, du 26 au 30 juin 2018, sous les auspices de la SCP, se poursuit. Les coprésidents de l'ICAP 2018 sont les D^{rs} Peter Graf et David Dozois. Le thème de l'ICAP 2018 – Psychology: Connecting Science to Solutions (La psychologie : relier science et solutions) – a été choisi pour souligner le partenariat fructueux entre la science et la pratique et pour lancer une invitation cordiale autant aux scientifiques qu'aux praticiens.

Le 79° congrès annuel de la SCP, y compris les assemblées générales annuelles des sections et les activités du congrès, aura lieu comme d'habitude, et ne sera pas affecté par l'organisation de l'ICAP. Les employés du siège social de la SCP jouent un rôle essentiel dans la planification de cet événement, certains étant présidents ou membres des différents comités organisateurs. La SCP travaillera avec MCI Canada pour faire de l'événement une expérience unique pour les membres de la SCP, les membres de l'Association internationale de psychologie appliquée (IAAP) et les non-membres. Pour des mises à jour, visitez régulièrement le site Web de la SCP à l'adresse http://www.cpa.ca/icap2018fr/ et suivez l'ICAP 2018 dans les médias sociaux (#ICAP2018).

RELATIONS AVEC LE GOUVERNEMENT, REPRÉSENTATION ET SENSIBILISATION

Élections de 2015. Pour se préparer aux élections fédérales, qui se tenaient le 19 octobre 2015, la SCP a lancé une campagne de sensibilisation. Dans le cadre de cette campagne, nous avons rédigé des lettres et sollicité des rencontres avec les partis politiques, mis en place une campagne électronique afin de faciliter les contacts des membres avec leurs candidats et envoyé un court questionnaire au bureau de chacun des partis politiques, afin de savoir s'ils prévoient, dans leur programme électoral, des investissements dans les services de santé mentale et le financement de la recherche. La SCP a également participé à l'activité électorale « Platform 2015 on Health » organisée par le Hill Times. http://www.hilltimes.com/news/2015/09/10/next-canadian-government-needs-to-take-federal-leadership-on-health-care-issues-say/43338

Après les élections, nous avons envoyé des lettres de félicitations au premier ministre, aux ministres et aux autres députés, et en avons profité pour parler du mandat du gouvernement en matière de santé, de santé mentale, d'éducation et de recherche. Les questions que nous voulons porter à l'attention du gouvernement sont, notamment, l'accès à des services de santé mentale de qualité, l'imposition des services psychologiques, l'accès à des études postsecondaires abordables, le logement abordable, l'élaboration d'une loi nationale sur les personnes handicapées, les changements à apporter au système de justice pénale et la réforme sur la détermination de la peine, la mise en œuvre d'un plan d'action national sur le trouble de stress posttraumatique et les besoins en santé mentale des militaires.

Après les élections, nous avons diffusé un communiqué de presse, dans lequel nous félicitons le gouvernement d'avoir ré-



tabli promptement le questionnaire détaillé obligatoire du recensement et, par la suite, nous avons donné un certain nombre
d'entrevues à la radio sur le sujet. En septembre, nous avons
présenté un mémoire à l'Assemblée des Premières Nations
(APN) et à la Direction générale de la santé des Premières nations et des Inuits (DGSPNI) de Santé Canada dans le cadre de
l'examen conjoint du Programme des services de santé non assurés (SSNA) et, en octobre, nous avons présenté un mémoire
au comité externe chargé d'examiner des options pour une réponse législative à l'affaire *Carter c. Canada* (aide médicale à
mourir). Nous tenons à remercier sincèrement le D^r Keith Wilson, un chef de file de la recherche sur la prise de décision en
fin de vie, qui est l'auteur principal du mémoire sur l'arrêt *Car-*ter. Enfin, en décembre 2015, nous avons rencontré pour la première fois le sous-ministre de la Santé nouvellement élu.

FAITS SAILLANTS DE L'ÉDUCATION ET DE LA FORMATION

Agrément. Comme nous l'avons déjà mentionné, le Dr Stewart Madon est, depuis octobre, le registraire de l'agrément et agent d'éthique. Au cours de l'été, les activités du bureau d'agrément ont été menées avec compétence par notre adjointe à l'agrément, Sarah Fletcher, en collaboration avec la présidente du Jury d'agrément, la chef de la direction et l'ancienne registraire, la Dre Tiessen, via Skype, depuis l'Inde. Le Jury d'agrément s'est réuni à Ottawa en octobre pour sa réunion d'automne. À cette occasion, l'agrément de quatre programmes a été renouvelé et un nouveau programme a reçu l'agrément; de plus amples informations sont disponibles dans la section du site Web consacrée à l'agrément. D'autres activités liées à l'agrément ont été menées, notamment l'examen du First Street Accord http://www.cpa.ca/agrement/agrementenameriquedunord/accordfirststreet/. Enfin, le Jury d'agrément commence tout juste à planifier la sixième révision des normes et des procédures d'agrément.

Sondage auprès des psychologues en pratique privée au sujet des stages et des internats. Le groupe de travail sur l'offre et la demande d'internats du Comité de l'éducation et de la formation de la SCP cherche des façons d'augmenter le nombre d'internats agréés offerts aux étudiants en psychologie professionnelle au Canada. L'idée de créer des internats dans le milieu de la pratique privée a donné lieu à l'élaboration d'un sondage visant à déterminer si, et dans quelles circonstances, les psychologues en exercice privé envisageraient d'offrir à des étudiants la possibilité de faire leur internat prédoctoral dans le cadre de leur pratique. Le sondage a pris fin à la mi-décembre.

Perfectionnement professionnel continu. Quatorze ateliers précongrès étaient prévus au congrès de 2015 de la SCP. Quatre d'entre eux (ateliers numéro 1, 9, 12 et 13) ont été enregistrés sur vidéo et seront accessibles, dans les prochains mois, sur notre site d'apprentissage en ligne http://www.cpa.ca/Congres/ateliersprecongres/.

Huit ateliers précongrès ont été proposés pour le congrès de 2016, qui se tiendra à Victoria.

PARTENARIATS ET REPRÉSENTATION AU NOM DE LA SCIENCE

Consortium canadien pour la recherche (CCR). La directrice générale associée de la SCP, la Dre Lisa Votta-Bleeker, occupe toujours la fonction de présidente du CCR, qui a tenu son quatrième petit-déjeuner annuel avec les bailleurs de fonds, le mercredi 9 décembre 2015, au siège social de la SCP. Des cadres supérieurs des IRSC, du CRSH, du CRSNG, de la Fondation canadienne pour l'innovation (FCI) et de Mitacs étaient présents. Les sujets suivants ont été abordés : le financement des activités de recherche, le recrutement et le maintien en poste des chercheurs et des chefs de file en recherche, la nécessité, pour le gouvernement, d'élaborer un plan d'action sur les grands projets scientifiques, la création de bourses de recherche échelonnées sur une plus longue période pour les chercheurs en début de carrière, les répercussions du vieillissement du corps professoral sur le recrutement, la participation du public dans le domaine de la recherche, le libre accès, la recherche orientée vers l'obtention de brevets, la mobilisation des connaissances, les partenariats de recherche et la recherche transdisciplinaire.

Le milieu de la recherche demeure préoccupé par les faibles hausses accordées aux organismes subventionnaires pour financer la recherche axée sur la découverte, et par l'inégalité de la répartition des fonds de recherche dans les trois conseils subventionnaires. En plus de ces préoccupations, le financement des étudiants et la situation de l'infrastructure de recherche au Canada sont les sujets principaux de la présentation du CCR dans le cadre des consultations prébudgétaires de 2016 et des activités menées dans le cadre de la campagne électorale. Le CCR a envoyé un questionnaire aux partis politiques fédéraux et a publié les réponses des partis sur son site Web, avant les élections; il a également diffusé un communiqué de presse, dans lequel il félicite le gouvernement d'avoir rétabli promptement le questionnaire détaillé obligatoire du recensement.

Représentation au nom de la science. Les membres sont encouragés à informer la SCP de toute question qui concerne la recherche en psychologie au Canada.

La SCP est actuellement en contact avec le CRSNG pour discuter d'une décision récente limitant à une seule le nombre de demandes de bourse postdoctorale qu'un chercheur est autorisé à présenter. La SCP a également pris contact avec les IRSC afin de discuter de la date limite de présentation des demandes de bourse postdoctorale Banting.

La directrice générale associée de la SCP continue d'envoyer *PSYence Update*, un bulletin trimestriel qui décrit les activités dans lesquelles est engagée la SCP au nom de la psychologie en tant que science.

La SCP continue de travailler en liaison avec Mitacs afin de trouver des moyens de faciliter les contacts entre les étudiants diplômés en psychologie et les spécialistes du développement

Nouvelles du siège social



des affaires de Mitacs dans les universités, afin de permettre aux étudiants de présenter des demandes au programme Mitacs Accélération, qui offre des stages impliquant des partenaires de l'industrie.

PARTENARIATS ET REPRÉSENTATION AU NOM DE LA PRATIQUE

Activités menées entre octobre 2015 et janvier 2016. Nous tenons à mentionner que, sans le travail compétent de Meagan Hatch, notre directrice des affaires publiques et des communications, nous n'aurions pu effectuer un travail et des activités de cette ampleur et de cette profondeur.

- Octobre 2015 Réunion de l'Association of State and Provincial Psychology Boards (ASPPB), présentation aux organismes de réglementation nord-américains sur les questions émergentes touchant la pratique professionnelle.
- Octobre 2015 Présentation lors de l'événement The Better Workplace Conference, organisé par le Conference Board du Canada.
- Octobre 2015 Rencontre avec le courtier et l'assureur pour discuter du renouvellement du programme d'assurance-responsabilité professionnelle conjoint de la SCP et du Conseil des sociétés professionnelles de psychologues (CSPP).
- Octobre 2015 Téléconférence avec la Section de la justice pénale au sujet de l'utilisation de l'isolement dans les établissements carcéraux au Canada.
- Novembre 2015 Rencontre avec l'Association canadienne des compagnies d'assurances de personnes pour discuter de l'élaboration d'un document d'orientation à l'intention des fournisseurs de services de santé dont les services sont couverts par un régime d'assurance par un tiers.
- Décembre 2015 Table ronde des intervenants du milieu des soins de santé sur l'avenir des soins de santé, convoquée par la Fédération canadienne des syndicats d'infirmières/infirmiers.
- Janvier 2016 Sous la direction de sa présidente, la Dre Andrea Piotrowski, la Direction générale de la pratique de la SCP a été l'hôte d'une conférence sur le leadership, qui a eu lieu les 15 et 16 janvier 2016, à Ottawa. Cette

conférence s'est adressée aux psychologues et aux étudiants qui travaillent ou étudient dans des associations, des universités ou des hôpitaux, et que le leadership et la formation sur la représentation intéressent. L'événement, qui a pris la forme d'un atelier interactif, avait comme objectif d'enseigner les principes clés du leadership, ainsi que des stratégies et des conseils utiles pour influencer les organes décisionnels, comme les gouvernements, les autorités régionales de la santé et les universités.

Groupe d'intervention action santé (GIAS). Après six années à la coprésidence du GIAS, la chef de la direction de la SCP a démissionné de son poste, mais elle continuera de représenter la SCP, au GIAS, à titre d'organisation membre. En 2016, le GIAS entend faire des pressions pour que soient apportés des changements au système de santé, dont il est question dans son document de consensus intitulé *Le modèle canadien : Accélérer l'innovation et améliorer le rendement du système de santé*. À la réunion de décembre du GIAS, l'Agence de la santé publique du Canada est venue faire une présentation sur les programmes fédéraux mis en place pour aider les réfugiés syriens. À plusieurs reprises, on a parlé de la santé mentale des réfugiés et de leur admissibilité à 10 séances de thérapie avec un psychologue. Vous trouverez des renseignements et des ressources supplémentaires à l'adresse http://www.cpa.ca/praticiens/Cultural/.

Alliance canadienne pour la maladie mentale et la santé mentale (ACMMSM). L'ACMMSM s'est réunie en octobre et a abordé certains besoins en matière de planification stratégique et de dotation, pour lesquels la SCP a apporté une certaine aide par l'intermédiaire de la Section de la psychologie industrielle et organisationnelle. La SCP espère épauler l'ACMMSM dans ses activités de représentation consécutives aux élections. Pour plus d'informations sur le travail de l'ACMMSM, y compris la célébration des « Visages de la maladie mentale » en octobre 2015, visitez le http://www.camimh.ca/.

Commission de la santé mentale du Canada (CSMC). La SCP fait toujours partie du Groupe de collaboration national sur la prévention du suicide de la CSMC. En ce moment, le groupe se penche sur les priorités de recherche. La SCP prévoit également de contribuer à la consultation de la CSMC sur le Plan d'action sur la santé mentale du Canada au début de la nouvelle année.

La psychologie sur la sellette...

Vous avez reçu une subvention, une bourse ou une chaire de recherche? Vous avez instauré une pratique novatrice, obtenu des résultats de recherche importants, reçu un prix? Nous voulons le savoir! Faites-nous parvenir un article d'au plus 900 mots, dans lequel vous décrivez vos réalisations, et nous le publierons dans une nouvelle rubrique de Psynopsis, appelée La psychologie sur la sellette. Pour en savoir plus, communiquez avec à l'adresse psynopsis@cpa.ca.



CALL FOR NOMINATIONS FOR THE CANADIAN NATIONAL COMMITTEE FOR THE INTERNATIONAL UNION OF PSYCHOLOGICAL SCIENCE (CNC/IUPsyS)

The CNC/IUPsyS is a CPA committee that enacts Canada's participation in the International Union of Psychological Science under a partnership agreement with the National Research Council of Canada. To ensure that the membership is representative of the diversity of psychological science, at-large members of the committee hold positions designated for psychologists whose research falls into one of three broad research domains: health science, neuro-bio-behavioural science, or social science.

Nominations are required from CPA Members and Fellows for a member-at-large from the **health sciences** domain, for a term that begins at the time of appointment and runs until June 2018.

Any CPA Member or Fellow whose primary activities are in research and teaching in the designated area may be nominated for this position. Given the nature of the Committee, candidates who are members of an international association or who have attended at least one international congress will be given preference.

Each nomination shall consist of:

- a letter from the nominator that states the position for which the candidate is being nominated, expresses support for the candidate, and contains a statement to the effect that the nominator has ascertained the candidate's willingness to stand for nomination:
- a current curriculum vitae of the candidate (including educational background, present and former positions, research and professional activities, organization membership and involvement, and international congress participation); and
- supporting statements from two CPA Members/Fellows.

Nominations and supporting documents, as well as requests for further information, should be sent by e-mail to the Chair of the CNC/IUPsyS at **j_a_veitch@jdarchitect.ca**. Nominations will be considered as of February 1, 2016, and the call will remain open until the position is filled.

PSYNOPSIS

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2016 Elections for the CPA Board of Directors

As we have described in recent issues of Psynopsis, voting procedures to elect members of CPA's Board of Directors have changed. CPA received its certificate of continuance under the new Canada Not-for-Profit Corporations Act (CNCA) governing not-for-profit organizations in 2013/14, and the association's by-laws were revised accordingly and fully adopted by the membership. The changed voting procedures, detailed below, mean that we no longer issue an election call in the fall as has been our past practice.

Instructions for Nominations

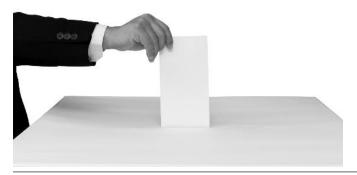
As per By-Law 5.06, any CPA Member can submit a nomination for election to the Board of Directors for the open positions, not less than 30 nor more than 65 days prior to the date of the Annual General Meeting of Members (AGM). A call for an advance vote will be issued 29 days before the AGM. Advance voting will occur much like voting has occurred in the past.

In early April 2016, a call for nominations will be issued for the following 7 positions:

- President-Elect
- Scientist
- Scientist-Practitioner
- At-large
- At-large reserved for a Francophone
- At-large reserved for a Masters level member
- Director representing the Council of Canadian Departments of Psychology (CCDP)

Please take this opportunity to speak with colleagues and friends over the next few months about running for a seat on the CPA Board of Directors. Your association needs you – membership engagement makes for a strong and successful organization!

Information about nomination requirements and procedures will be communicated via CPA News and posted on CPA's website by February 15, 2016. For more information about elections at any time, please contact Cara Bernard at cbernard@cpa.ca.



Present Board Representation

So that you may be aware of the present balance of the Board, its current voting membership is as follows:

- President: Kevin Kelloway, Saint Mary's University, Halifax, NS, Industrial/Organizational Psychology (retires 2017)
- **Past-President:** Kerry Mothersill, Alberta Health Services, Calgary, AB, Clinical (retires 2016)
- **President-elect:** David Dozois, University of Western Ontario, London, ON, Clinical (retires 2018)

Directors Retiring in 2016

- Scientist: John Meyer, University of Western Ontario, ON, Industrial/Organizational Psychology
- **Scientist-Practitioner:** Donald Saklofske, University of Western Ontario, ON, Clinical
- At-large: Judi Malone, Athabaska University, AB, Health Psychology
- At-large reserved for a Masters level member: Dawn Hanson, Winnipeg, MB, Private Practice
- At-large reserved for a Francophone: David Bourgeois, Saint Mary's University, Halifax, NS, Industrial/Organizational Psychology
- Director representing the Council of Canadian Departments of Psychology (CCDP): Valerie Thompson, University of Saskatchewan, SK, Brain and Cognitive Science

Directors Retiring in 2017

- Practitioner: Samuel Mikail, Sun Life Assurance, Aurora, ON, Clinical
- Director representing Section on Students: Zarina Giannone, University of British Columbia, BC Counselling
- Director representing the Council of Professional Associations of Psychologists (CPAP): Andrea Piotrowski,
 University of Manitoba, Winnipeg, MB, Clinical Health
 Psychology
- Director representing the Canadian Council of Professional Psychology Programs (CCPPP): Rupal Bonli,
 Royal University Hospital, Saskatoon, SK, Clinical Health Psychology
- Director representing the Canadian Society for Brain, Behaviour and Cognitive Science (CSBBCS): Jean Saint-Aubin, Université de Moncton, Brain and Cognitive Science



Élection des membres du conseil d'administration de la SCP de 2016

Comme nous l'avons mentionné dans les précédents numéros de *Psynopsis*, la procédure de vote pour élire les membres du conseil d'administration de la SCP a changé. La SCP a reçu, en 2013-2014, son certificat de prorogation en vertu de la nouvelle *Loi canadienne sur les organisations à but non lucratif* (Loi BNL), qui régit les organismes sans but lucratif, et les règlements administratifs de l'association ont été modifiés en conséquence et adoptés par les membres. En vertu de la nouvelle procédure de vote, nous n'annonçons plus la tenue des élections à l'automne, comme nous le faisions auparavant.

Instructions relatives aux mises en candidature

Conformément au paragraphe 5.06 des règlements administratifs, les membres peuvent présenter une candidature aux postes ouverts au conseil d'administration, au moins 30 jours et pas plus de 65 jours avant la date de l'assemblée générale annuelle des membres (AGA). L'annonce du vote par anticipation sera publiée 29 jours avant l'AGA. Le vote par anticipation se fera sensiblement comme dans le passé.

Au début d'avril 2016, les sept postes suivants seront mis en candidature :

- Président désigné
- Administrateur scientifique
- Administrateur scientifique-praticien
- Administrateur non désigné
- Administrateur non désigné représentant les francophones
- Administrateur non désigné représentant les psychologues au niveau de la maîtrise
- Administrateur représentant le Conseil canadien des départements de psychologie (CCDP)

Nous vous invitons donc à encourager, au cours des prochains mois, vos collègues et vos amis à envisager de siéger au conseil d'administration de la SCP. Votre association a besoin de vous. Le dynamisme et la réussite de l'organisation dépendent de l'engagement de ses membres!

Des renseignements sur les exigences et la procédure de mise en candidature vous seront communiqués via les Nouvelles de la SCP et affichés sur le site Web de la SCP d'ici le 15 février 2016. Pour plus d'informations sur les élections, vous pouvez communiquer, en tout temps, avec Cara Bernard à cbernard@cpa.ca.

Composition actuelle du conseil d'administration

À titre d'information, voici les membres votants qui siègent actuellement au conseil d'administration :

Président: Kevin Kelloway, Université Saint Mary's, Halifax, Nouvelle-Écosse, psychologie industrielle/organisa-

- tionnelle (en poste jusqu'en 2017)
- Président sortant: Kerry Mothersill, Alberta Health Services, Calgary, Alberta, psychologie clinique (en poste jusqu'en 2016)
- Président désigné: David Dozois, Université Western, London, Ontario, psychologie clinique (en poste jusqu'en 2018)

Administrateurs dont le mandat se termine en 2016

- Scientifique: John Meyer, Université Western, Ontario, psychologie industrielle/organisationnelle
- **Scientifique-praticien :** Donald Saklofske, Université Western, Ontario, psychologie clinique
- Administrateur non désigné: Judi Malone, Université d'Athabaska, Alberta, psychologie de la santé
- Administrateur non désigné représentant les psychologues au niveau de la maîtrise : Dawn Hanson, Winnipeg, Manitoba, pratique privée
- Administrateur non désigné représentant les francophones: David Bourgeois, Université Saint Mary's, Halifax, Nouvelle-Écosse, psychologie industrielle/organisationnelle
- Administrateur représentant le Conseil canadien des départements de psychologie (CCDP): Valerie Thompson, Université de la Saskatchewan, Saskatchewan, cerveau et sciences cognitives

Administrateurs dont le mandat se termine en 2017 :

- **Praticien :** Samuel Mikail, Sun Life Assurance, Aurora, Ontario, psychologie clinique
- Administrateur représentant la Section des étudiants : Zarina Giannone, Université de la Colombie-Britannique, Colombie-Britannique, psychologie du counseling
- Administrateur représentant le Conseil canadien des départements de psychologie (CCDP): Andrea Piotrowski, Université du Manitoba, Winnipeg, Manitoba, psychologie clinique de la santé
- Administrateur représentant le Conseil canadien des programmes de psychologie professionnelle (CCPPP):
 Bonli Rupal, Royal University Hospital, Saskatoon, Saskatchewan, psychologie clinique de la santé
- Administrateur représentant la Société canadienne pour le cerveau, le comportement et les sciences cognitives (SCCCSC): Jean Saint-Aubin, Université de Moncton, Nouveau-Brunswick, cerveau et sciences cognitives



LATIN AMERICA

Host of Two Regional Conferences of Psychology

Janel Gauthier, Ph.D., Chair Marta Young, Ph.D., Member International Relations Committee



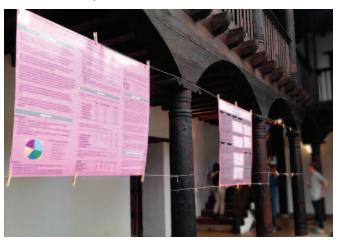
San Cristobal de las Casas, Chiapas, Mexico

Photo: Wikipedia

Two major regional conferences of psychology were recently held in Latin America; the Regional Meeting of the International Association for Cross-Cultural Psychology (IAACP) in Mexico and the First Latin American Regional Conference of Psychology in Colombia. This brief report is presented on behalf of the International Relations Committee to highlight the vitality and richness of psychology in Latin America.

2015 International Association for Cross-Cultural sychology (IACCP): Regional Conference

This regional conference of the IACCP took place in the beautiful, colonial town of San Cristobal de las Casas, Chiapas, Mexico from July 28-31, 2015. The conference venue was the



Centro de Congresos Caza Mariegos, the 16th century home of the founder of San Cristobal. Over 140 psychologists and students representing over 50 countries participated. They came from all corners of the world, including Europe (Poland, Hungary, France, Portugal, Italy, U.K., Spain, Finland), Asia (China, Malaysia, Japan, Taiwan), Oceania (New Zealand, Australia), Africa (Ghana, Nigeria), Latin America

(Colombia, Mexico, Venezuela, Costa Rica), the Middle East (Bahrain, Israel, Oman), and North America (Canada, the United States). This diversity of international delegates was impressive and intellectually and culturally stimulating.

Two pre-conference workshops were offered. Alejandra Dominguez Espinosa presented a half-day workshop on how to develop cross-cultural investigations, while Adriana Manago and Camilo Garcia presented on dealing with social change and human development. Following these workshops, the conference opened with a moving memorial in honour of Kwok Leung, past president of IACCP, who passed away suddenly and unexpectedly in Hong Kong at the age of 57 on May 25, 2015.

The Scientific programme included three plenary speakers, three invited symposia, 14 symposia, 15 paper sessions, and two poster sessions. The first plenary, by Rolando Diaz-Loving, was entitled: "How to fit culture in psychology: The role of the Mexican socio-cultural premises of self concept". The second plenary by Suzanne Gaskins, explored the topic of children's play as cultural practice within the context of a Yucatec Maya village. In the third plenary, Judith Gibbons discussed the challenges and rewards of community psychology in Guatemala.

The three invited symposia were equally diverse and thought-provoking. Heejung Park spoke on the impact of social change and human development. Mariano Rosabal-Coto gave a presentation on the theoretical and methodological issues concerning the cultural specificity of Latin American groups, and Sofia Rivera Aragon presented on the ethnopsychology of interpersonal relations in Mexico.

The symposia presenters addressed a broad range of topics, such as acculturation and mental health, child development and culture, intergroup attitudes among youth, autism and culture, gender roles and culture change, communication technologies and human connection in a global context, children's learning processes in Mayan communities and Mexican ethnopsychology. The two poster sessions were held in the historic courtyard of Casa Mazariegos where posters were hung on a string by wooden clothes pegs creating a charming effect, not to mention a low cost alternative!



The opening reception was vibrant and provided delegates with the opportunity to share and reconnect in an informal and beautiful setting. A Mariachi band played traditional tunes much to everyone's delight. The closing banquet and dance allowed students and professors to intermingle. The students reported enjoying these informal gatherings as it gave them opportunities to share their research projects as well as their experiences as graduate students from diverse cultural vantage points. Day trips were organized to surrounding villages to visit women's weaving cooperatives. On several evenings, many attendees met at a Zapatista café to dance and to meet with indigenous peoples fighting for human rights and social justice in Chiapas, Mexico's most impoverished state. All would attest that these impromptu, intercultural connections were invaluable and meaningful. There is no doubt that psychologists and students alike left the conference with San Cristobal etched in their souls.

The First Latin American Regional Conference of Psychology (LARCP)

This conference took place in Armenia, Colombia from September 2-5, 2015. It was held jointly with the Colombian Congress of Psychology and was hosted by the Colombian Association of Psychologists (COLPSIC), and the Colombian Association of Faculties of Psychology (ASCOFAPSI). It was organised under the auspices of the International Union of Psychological Science with the collaboration of the International Association of Applied Psychology and the International Association for Cross-Cultural Psychology.

Almost 2,500 psychologists and students attended the Conference, representing a total of 23 countries from across the world. Students represented about 60% of the total number of delegates. Most attendees came from countries in Latin Amer-

ica, namely, Argentina, The Bahamas, Bolivia, Brazil, Cuba, Colombia, Costa Rica, Chile, Ecuador, Guatemala, México, Peru, Salvador, and Venezuela. The others came from Canada, China, Germany, India, South Africa, Spain, Turkey, the United States, and the United Kingdom.

Over 1,000 presentations at the conference covered a broad range of topics in psychology. The scientific program included two invited keynote addresses, 59 invited lectures by national and international guests, 71 symposia, 52 paper sessions in which a total of 452 papers were presented, 335 digital posters, 27 workshops, and nine debates. In addition, 18 books were launched.

National organisations in Latin America are highly interested in being connected to a network that will allow them to develop synergy with regional and international organizations. Consequently, an agenda was developed in parallel with the scientific program to encourage meetings between colleagues from Latin America and around the world. Ten meetings of representatives of different academic and professional bodies were also held during the Conference.

A two-day capacity-building workshop was held during the Conference in order to support actions for the development of national professional organizations in the region. Representatives of 16 Latin American countries participated in the workshop. They were assigned to four different groups each of which discussed one of the following topics: organization and governance, international influence (leadership), quality of training and professional behavior, and social impact. During a plenary session at the end of the second day, a declaration was introduced and signed; the Armenia-Colombia Declaration. This Declaration recognises goals to be achieved in the region and emphasises the importance of cooperation among national organisations to achieve those goals.

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– Special Issue on Everyday Attention

Editor in Chief: Penny Pexman, Ph.D.

Guest Editors: Evan F. Risko, Ph.D., University of Waterloo, and Alan Kingstone, Ph.D., University of British Columbia

Research on "everyday attention" focuses on cognition in the context of people's day-to-day lives. This special issue seeks to bring together cutting edge research papers investigating diverse aspects of everyday attention (i.e., investigations of attention using naturalistic stimuli, tasks, and/or settings) that contribute to the basic understanding of attention.

Researchers from diverse sectors with an interest in issues relevant to everyday attention are invited to submit a full paper to the *Canadian Journal of Experimental Psychology* Manuscript Central website, indicating in the cover letter that the manuscript should be considered for this special issue. Manuscripts should be submitted elec-

tronically in accordance with APA guidelines in either English or French and must contain original, unpublished work. All submitted papers will go through rigorous review with consideration given to their originality, their theoretical contribution, their methodological soundness, the clarity of the presented results and conclusions, and the



relevance of the submission for the special issue.

Please send expressions of interest to the guest editors via email by February 15, 2016 (efrisko@uwaterloo.ca; alan.kingstone@ubc.ca). The deadline for submission of papers is June 1, 2016.

For more information, visit www.cpa.ca/JournalAlert.

Canadian Psychology

– Special Issue on Immigration and Refugees

Editor: Martin Drapeau, Ph.D.



Immigration and refugees continues to be a hot topic in the Western world as millions of people are forced to flee their homelands to escape persecution, war and/or severe human rights abuses. With an increasing number of Syrian refugees arriving in Canada every day, questions of the effects of migration are never far from mind.

Canadian Psychology encourages researchers from a range of disciplines within psychology to submit manuscripts for this special issue examining various topics related to immigration and refugees, such as:

- The psychological experience of immigration and/or of being a refugee
- Mental health issues related to immigration and/or being a refugee
- Resiliency of refugees and the factors that support and/or hinder resilience in immigrants and refugees
- Challenges related to social integration for different age groups
- Community mobilization and the role of communities and community groups in facilitating the immigration/ refugee process
- The challenges and best practices associated with offering culturally and linguistically appropriate psychological services to immigrants and/or refugees
- Xenophobia and discrimination vis à vis immigrants and refugees
- · Acculturation and other issues related to culture

While review papers are preferred, different types and formats of papers will be accepted for this special issue, including review and scoping papers; original studies; and opinion papers, commentaries, and letters to the editor. All submissions must be no more than 30 pages (including references) and will undergo peer-review.

Manuscripts should be submitted in English or French via the *Canadian Psychology* online submission portal by May 1, 2016. Authors must indicate clearly that their submission should be considered for this special issue.

For more information, visit www.cpa.ca/JournalAlert or email martin.drapeau@mcgill.ca.



Revues de la SCP – Numéros spéciaux APPEL D'ARTICLES

Revue canadienne de psychologie expérimentale – Numéro spécial sur l'attention dans la vie quotidienne

Rédactrice en chef: Penny Pexman, Ph.D. Rédacteurs en chef invités: Evan F. Risko, Ph.D., Université de Waterloo, et Alan Kingstone, Ph.D., Université de la Colombie-Britannique

La recherche sur l'« attention dans la vie quotidienne » se concentre sur la cognition dans la vie de tous les jours. Ce numéro spécial vise à regrouper des documents de recherche de pointe sur les différents aspects de l'attention au quotidien (p. ex., étude de l'attention à l'aide de stimuli, de tâches ou de cadres naturels), qui contribuent à la compréhension générale de l'attention.

Les chercheurs qui s'intéressent à l'attention dans la vie quotidienne sont invités à proposer des articles complets à partir du portail de soumission d'articles en ligne de la *Revue canadienne de psychologie expérimentale*, en indiquant, dans la lettre d'accompagnement, que le

manuscrit doit être étudié pour publication dans le numéro spécial. Les articles proposés doivent être transmis par voie électronique; ils doivent être présentés selon les règles de l'APA, en français ou en anglais, et doivent comprendre des travaux originaux et inédits. Tous les articles présentés feront



l'objet d'un examen rigoureux, qui tiendra compte de leur originalité, leur contribution théorique, leur solidité méthodologique, la clarté des résultats et des conclusions présentés et la pertinence de l'article par rapport au numéro spécial.

Veuillez envoyer votre expression d'intérêt par courriel, avant le 15 février 2016, aux rédacteurs en chef invités (efrisko@uwaterloo.ca, alan.kingstone@ubc.ca). La date limite pour proposer un article est le 1er juin 2016.

Pour plus d'informations, visitez le http://www.cpa.ca/JournalAlertfr/.

Psychologie canadienne

– Numéro spécial sur l'immigration

et les réfugiés

Rédacteur en chef: Martin Drapeau, Ph.D



L'immigration et les réfugiés demeurent un sujet brûlant dans le monde occidental, des millions de personnes étant forcées de quitter leur pays pour échapper à la persécution, à la guerre et/ou à de graves violations des droits de la personne. Pendant qu'un nombre croissant de réfugiés syriens arrivent chaque jour au Canada, la question des effets de la migration est souvent bien présente à notre esprit.

Psychologie canadienne invite les chercheurs de toutes les disciplines de la psychologie à proposer des articles, pour ce numéro spécial, portant sur différents sujets liés à l'immigration et aux réfugiés, notamment :

- L'expérience, sur le plan psychologique, de l'immigration ou de la condition de réfugié
- Les problèmes de santé mentale liés à l'immigration ou à la condition de réfugié
- La résilience des réfugiés et les facteurs qui favorisent ou entravent la résilience chez les immigrants et les réfugiés
- Les défis associés à l'intégration sociale selon différents groupes d'âge
- La mobilisation de la communauté et le rôle des collectivités et des groupes communautaires dans la facilitation du processus d'immigration et d'accueil des réfugiés
- Défis et pratiques exemplaires associés à la prestation de services psychologiques, adaptés sur le plan culturel et linguistique, s'adressant aux immigrants ou aux réfugiés
- Xénophobie et discrimination vis-à-vis des immigrants et des réfugiés
- L'acculturation et autres questions liées à la culture

Bien que les articles de synthèse soient privilégiés, différents types et formats d'articles seront acceptés pour ce numéro spécial, y compris des revues et des documents exploratoires, des études originales ainsi que des textes d'opinion, des commentaires et des lettres au rédacteur en chef. Les articles proposés ne doivent pas dépasser 30 pages (bibliographie comprise) et ils seront soumis à un examen par les pairs.

Les manuscrits doivent être soumis en français ou en anglais via le portail de soumission d'articles en ligne de *Psychologie canadienne* d'ici le 1^{er} mai 2016. Les auteurs doivent indiquer clairement que leur manuscrit doit être étudié pour publication dans le numéro spécial.

Pour plus d'information, visitez le http://www.cpa.ca/JournalAlertfr/ou écrivez à martin.drapeau@mcgill.ca.



PRE-CONVENTION WORKSHOP

Date: Wednesday June 8, 2016

Location: Victoria Conference Centre and the

Fairmont Empress Hotel

Attend CPA pre-convention workshops and earn continuing education credits upon successful completion.

All workshops will be presented in the language in which they are described.

The deadline for workshop registrations is May 9, 2016.

Please note that pre-convention workshops may be cancelled due to low registration. All registrants will be notified.

Those who register for pre-convention workshops before May 9, 2016 are eligible for a reduced convention registration fee.

ATELIERS PRÉCONGRÈS

mercredi le 8 juin 2016 Date:

Lieu: Victoria Conference Centre and the

Fairmont Empress Hotel

Assistez aux ateliers précongrès de la SCP et obtenez des crédits d'éducation permanente lorsque terminés avec succès.

Tous les ateliers sont décrits dans la langue dans laquelle ils seront présentés.

La date limite pour les inscriptions aux ateliers est le 9 mai 2016.

Veuillez noter que les ateliers précongrès peuvent être annulés dû à un manque d'inscription.

Les personnes qui s'inscrivent aux ateliers précongrès au plus tard le 9 mai 2016 sont admissibles à des frais réduits pour assister au congrès.

Please register online at http://www.cpa.ca/convention/ Veuillez vous inscrire en ligne au http://cpa.ca/congres/

WORKSHOP / ATELIER #1

CE Credits: 6

Acceptance and Change in Couple Therapy: Integrative Behavioral Couple Therapy

Presented by: Andrew Christensen

Sponsored by: CPA Section on Clinical Psychology

CPA Members: \$200 + HST Cost:

Student Affiliates and

Student Non-Affiliates: \$85 + HST Non-members: \$250 + HST

Duration: 9:00am - 4:30pm

Workshop Description: Almost 50% of married couples will divorce; many of those who stay together are unhappy. Integrative Behavioral Couple Therapy (IBCT) is an evidence-based treatment that can improve the quality of romantic relationships. Consistent with other third wave behavioral approaches, IBCT emphasises emotional acceptance as well as change and is experiential in its treatment strategies. In this one-day workshop, Dr. Christensen will provide the theoretical background of IBCT (how it differs from traditional and cognitive behavioral

couple therapy), the assessment strategies of IBCT, the treatment strategies of IBCT, and the empirical support for IBCT. The workshop will illustrate assessment and treatment techniques through videotapes examples from couples in treatment and provide role-play experiences in implementing these techniques.

WORKSHOP/ATELIER#2

CE Credits: 2.5

From personal attitudes to colonial narratives: The problem with tolerance in our work with Indigenous people

Presented by: Cheryl Ward and Collin Van Uchelen

Sponsored by: CPA Sections on Community Psychology and

Aboriginal Psychology

CPA Members: \$45 + HST

Student Affiliates and

Student Non-Affiliates: \$25 + HST

Non-members: \$45 + HST

Duration: 9:00am - 12:30pm

Workshop Description: What place does tolerance have in our practice? This workshop focuses on ideas for working more effectively and respectfully with indigenous people. The activities help participants explore their own judgements and consider the implications for their work with indigenous people.

The first activity guides participants to privately examine their own level of tolerance in response to a variety of visual images. It is designed to help participants recognize the range of their response including appreciation, acceptance, tolerance, avoidance, and repulsion. This sets up the interactive activity that follows. In the second activity, participants are assigned to one of several small groups. Each group is presented with a series of scenarios depicting situations involving Indigenous people. These vignettes also reflect the roles of professionals across a variety of settings. Each group responds to the scenarios in terms that exemplify one of the degrees of "tolerance." The responses are then shared and discussed. The activities are viewed within the context of professional level training on cultural competency/safety specific to working with Indigenous people. The workshop concludes with a discussion of broader primary colonial narratives about Indigenous people in Canada and their implications for professional practice.

WORKSHOP / ATELIER #3

CE Credits: 3.5

Building a Culture of Supervisory Competence: How to develop, mentor, and support clinical supervisors

Presented by: Catherine Costigan, Julie Gosselin, Susan Jerrott, and Ed Johnson

Sponsored by: The Canadian Council for Professional **Psychology Programs**

Note: This workshop will include a continental breakfast, coffee for a break, and lunch.

CPA Members: \$100 + HST Cost: Student Affiliates and

Student Non-Affiliates: \$50 + HST

Non-members: \$125 + HST

Duration: 9:00am - 2:00pm

Workshop Description: This half-day workshop is focused on training and supporting competent clinical supervisors. Supervisory skill is a professional competency that is relevant to all levels of practice, from the initial development of supervisory skills among graduate students and interns, to the ongoing support of experienced clinical supervisors in our training settings. This workshop will address the best (and worst) supervisory practices - the "do's and don'ts" of supervision. Participants will receive training in an evidence-based model of clinical supervision. In addition, participants will explore strategies for the self-assessment of supervisory competence and reflect on the use of professional disclosure statements and supervision contracts in one's supervision practice. The coverage of these topics will be facilitated by large and small group discussion including a) the use of vignettes to identify best (and worst) practices and supervision challenges; b) the personal, institutional, and systemic factors that affect their clinical supervision practice; and c) the identification of one or more best practices that participants wish to adopt into their supervision practice.

WORKSHOP/ATELIER#4

CE Credits: 3

The Heart of Belonging: Creating a Sense of Community Where It Matters

Presented by: Collin Van Uchelen

Sponsored by: CPA Section on Community Psychology

and Environmental Psychology

Note: Coffee will be served in the afternoon.

Cost: CPA Members: \$45 + HST

Student Affiliates and

Student Non-Affiliates: \$30 + HST

Non-members: \$45 + HST

Duration: 1:30pm - 4:30pm

Workshop Description: This workshop focuses on the psychological sense of community we have with others in our lives. It is about the connections we have within the communities to which we belong. In this 3-hour interactive workshop, participants will learn how to create and sustain a sense of community together. The main concepts are examined with respect to both individual and collective levels of analysis. Various approaches are used to address the material, including individual exercises, partner interactions, small group activities, discussions, and presentations by the facilitator. The workshop is focused, fun, and engaging, and it will be especially helpful to those who would like to learn more about the psychological sense of community and how to enhance it in settings where it matters (e.g., small group, workplace, neighbourhood, community organizations, etc.). The concepts are readily applicable to our lives and to the lives of those with whom we work.

WORKSHOP/ATELIER #5

CE Credits: 6

When the going gets tough in CBT, get mindfulness! Individual Mindfulness-based Cognitive Therapy

Presented by: Mark Lau

Cost: CPA Members: \$195 + HST

Student Affiliates and

Student Non-Affiliates: \$75 + HST

Non-members: \$250 + HST

Duration: 9:00am - 4:00pm

Workshop Description: Gain a new understanding of the use of Mindfulness-based Cognitive Therapy (MBCT) in an individual format for depression and anxiety in this interactive workshop through an iterative mix of didactic instruction, mindfulness mediation, and inquiry/group discussion. CBT, a change-based approach, is effective in treating depression and anxiety disorders. Yet therapists, at times, find themselves struggling with how to help their clients when traditional CBT techniques don't work. MBCT, an acceptance-based approach integrating systematic mindfulness meditation practice with cognitive therapy for depression, has been shown to be effective in treating acute symptoms of depression and anxiety. In this way, MBCT offers clients a way to encounter, identify, and develop a new relationship to those modes of mind that often characterize mood and anxiety disorders by strengthening an orientation to the present moment. This promotes, among other things, the possibility of de-centering and dis-identifying from ruminative or anxious thinking patterns along with a more kindhearted self-observation and a softening of self-judgement. While MBCT was originally developed as a group intervention, most clinicians work primarily with individual clients. Thus, in this workshop, we will explore how one might use mindfulness meditation in individual CBT.

WORKSHOP/ATELIER #1

CE Credits: 3

How Positive Psychology and Social Relationship Can Improve Health and Wellbeing

Presented by: Sarah Pressman and Kim Lavoie

Sponsored by: CPA Section on Health Psychology

and Behavioural Medicine

Cost: CPA Members: \$125 + HST

Student Affiliates and

Student Non-Affiliates: \$75 + HST Non-members: \$125 + HST

Duration: 9:00am - 12:30pm

Workshop Description: This workshop will examine the role that positive emotions and social relationships play in influencing stress and health outcomes – in particular, how these factors "get under the skin" to influence our well-being. Pathways that will be discussed include physiological processes such as stress hormone reactivity, cardiovascular response, and immune system change, as well as health behaviours like sleeping, exercise, and other leisure activities. This workshop will also discuss the role of these positive psychosocial factors in buffering the detrimental effects of stress. For example, the extent to which happiness and other positive measures are associated with an improved ability to handle stress, both from a psychological and physiological standpoint. This workshop will include didactic content as well as interactive exercises and group discussions.

WORKSHOP/ATELIER #7

CE Credits: 3.25

The intersection between mental health, physical health and substance use: The role of Psychology in bridging the gaps in care

Presented by: Kim Corace, Sherry Stewart, and Melanie Willows

Sponsored by: CPA Sections on Health Psychology and Behavioural Medicine and Addiction Psychology

Note: Coffee will be served during the break.

Cost: CPA Members: \$125 + HST

Student Affiliates and

Student Non-Affiliates: \$60 + HST Non-members: \$125 + HST

Duration: 1:00pm - 4:30pm

Workshop Description: The majority of individuals struggling with substance use disorders have concurrent mental health disorders, and many of these individuals also struggle with comorbid physical health disorders. This complex interplay of comorbidities often present as some of the most complicated and difficult-to-treat cases. While integrated, concurrent disorders treatment is key for successful outcomes, our health services are often fragmented and compartmentalized. Our most vulnerable are the least likely to get access to physical and mental health care, including psychological care. These clients

highly benefit from psychology services; however, psychologists face numerous challenges providing them comprehensive care. This workshop will include both didactic and interactive learning components to promote best practices for concurrent disorders care within psychological services. We will address the important question of: "How can psychologists help bridge the gap in providing care to those with substance use and mental health problems?"

WORKSHOP/ATELIER#8

CE Credits: 5.5

From Youth Sport Participants to Olympians: Tools, Tips, and Strategies for **Professionals** Interested in Direct or Related Practice in **Sport and Exercise Psychology**

Presented by: Laura Farres, Natasha Kutlesa, and Penny Werthner

Sponsored by: CPA Section on Sport and Exercise Psychology and the Canadian Sport Psychology Association

CPA Members: \$125 + HST Cost: Student Affiliates and

Student Non-Affiliates: \$65 + HST

Non-members: \$150 + HST

Duration: 9:00am - 5:00pm

Workshop Description: A full day of workshops is planned to bring together multiple disciplines in the area of sport and exercise psychology for the purpose of gaining practical and experiential knowledge from expert sport psychology professionals in three topical issues in sport. The tools covered in these workshops are aimed towards facilitating the development and optimization of performance, well-being, and personal growth in sport participants. The first workshop will explore the role of the psychology professional in the health team and detail recommendations for evaluation and management of sportrelated concussions. The second will explore sport psychology work and consultation specific to helping the sport family through applied case studies. The day will conclude with a workshop focusing on the application of bio- and neurofeedback tools in sport and exercise psychology for optimal performance and well-being. Specifically, this last workshop will provide a demonstration of the training protocols used in this area and examine several case studies with applications to Olympic athletes and coaches, in order to illustrate how to integrate bio- and neurofeedback into an existing professional practice.

Plenary Speakers/Séances plénières



CPA Presidential Address/ Allocution présidentielle

mental health advocate

"Mental Health in the Workplace: Toward Evidence Based Practice"

E. Kevin Kelloway, Ph.D., CPA President



Honorary President's Address/ Allocution de la Présidente d'honneur Mary Walsh, Actress, comedian, political satirist,



Practice of Psychology Keynote Address/ Conférence de la pratique de la psychologie Terence Keane, Director, Behavioral Science Division, VA's National Center for PTSD Professor and vice-chair of the Department of Psychiatry, Boston University School of Medicine Lecturer on Psychiatry, Harvard Medical School



Science of Psychology Keynote Address/ Conférence de la science de la psychologie Julian Barling, Professor and Queen's Research Chair School of Business, Queen's University



Featured Speaker/Conférencier "The Importance of Mapping Human Values as Mental Concepts: Experimental Evidence and Cross-Cultural Extensions" Gregory Maio, Cardiff University



CPA/Section Co-sponsored Invited Speaker/ Conférencier invité par la SCP et la section



"Hybrid Spaces: A Missing Piece of of the gender "value" gap" Hilary Lips, Radford University



"Cultural-Clinical Psychology: From Field to Lab to Clinic" Andrew Ryder, Concordia University & Jewish General Hospital



"Why I Dislike the Null Hypothesis Significance Testing Procedure" David Trafimow, New Mexico State University



"Passion in Sport and Exercise: Theory and Research" Robert Vallerand, Université du Québec à Montréal

CPA SECTIONS RELATED PROGRAM / PROGRAMME LIÉ AUX SECTIONS DE LA SCP

Aboriginal Psychology / Psychologie autochtone

Section Invited Speaker / Conférencier invité par la section "Indigenous Concepts of Well-being & Inner Resilience Activities" Roger John, University of Victoria Annual Meeting / Assemblée générale annuelle Reception / Réception

Addiction Psychology / Psychologie de la toxicomanie

Section Invited Speaker / Conférencier invité par la section "How Come a Psychologist Gets to Work on Alcohol Epidemiology and Policy? Case Studies of Research Leading to Policy Change" Timothy Stockwell, Centre for Addictions Research of BC, University of Victoria Annual Meeting / Assemblée générale annuelle Reception / Réception

Adult Development and Aging / Développement adulte et vieillissement Annual Meeting / Assemblée générale annuelle

Brain and Cognitive Science / Cerveau et science cognitive

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Why I Dislike the Null Hypothesis Significance Testing Procedure" David Trafimow, New Mexico State University Section Invited Speaker / Conférencier invité par la section "Perception and Memory: Applications to Real-World Events"

Geoffrey Loftus, University of Washington Annual Meeting / Assemblée générale annuelle

Clinical Neuropsychology / Neuropsychologie clinique

Section Invited Speaker / Conférencière invitée par la section "The Future of Brain Injury Rehabilitation: Advances in Neuroscience and

the Integration of Applied Technologies" Catherine Mateer, University of Victoria

Conférencier invité par la section

"On the Health of Clinical Neuropsychology in Canada: Considering the past, Present, and Future from the Eyes of a Clinician-Scientist"

Brian Brooks, Alberta Children's Hospital Annual Meeting / Assemblée générale annuelle

Clinical Psychology / Psychologie clinique

Section Invited Speaker / Conférencier invité par la section "Narcissistic Perfectionism: New Evidence from Three Studies Involving Multiple Sources and Methods"
Simon Sherry, Dalhousie University
Annual Meeting / Assemblée générale annuelle
Reception / Réception

Community Psychology / Psychologie communautaire

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Hybrid spaces: A Missing Piece of Environmental Psychology" Robert Gifford, University of Victoria Annual Meeting / Assemblée générale annuelle

Counselling Psychology / Psychologie du counseling

Section Invited Speaker / Conférencier invité par la section
"Reimagining Canadian Counselling Psychology: Colouring-in by integrating Global South Psychologies and Healing Practices"
Roy Moodley, OISE, University of Toronto
Annual Meeting / Assemblée générale annuelle
Reception / Réception

Criminal Justice Psychology / Psychologie et justice pénale

Annual Meeting / Assemblée générale annuelle

Developmental Psychology / Psychologie du développement

Annual Meeting / Assemblée générale annuelle

Education and School Psychology / Psychologie éducationnelle et scolaire

Section Invited Speaker / Conférencière invitée par la section

"Teacher Help: An Online Program for Meeting the Needs of Youth with Mental Health Disorders in Schools"

Penny Corkum, Department of Psychology and Neuroscience, Dalhousie University

Annual Meeting / Assemblée générale annuelle Reception / Réception

Environmental Psychology / Psychologie de l'environnement

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Hybrid Spaces: A Missing Piece of Environmental Psychology" Robert Gifford, University of Victoria

Section Invited Speaker / Conférencier invité par la section

"How Can Behaviour Science Contribute to Sustainability?"

Jaiying Zhao, University of British Columbia, Institute for Resources, Environment and Sustainability

Annual Meeting / Assemblée générale annuelle

Extremism and Terrorism / Extrémisme et terrorisme

Section Invited Speaker / Conférencière invitée par la section "A Psycho-Political Theory of Victimhood: Politics, Conflict and the Construction of Victim-Based Identity"

Tami Jacoby, Department of Political Studies, University of Manitoba Annual Meeting / Assemblée générale annuelle

Family Psychology / Psychologie de la famille

Section Invited Speaker / Conférencière invitée par la section "The Military Family: Supporting Child and Family Development Affected By Operational Stress Injuries"

Megan McElheran, WGM Psychological Services; Kelly Schwartz, University of Calgary

Annual Meeting / Assemblée générale annuelle

Health Psychology and Behavioural Medicine / Psychologie de la santé et médecine du comportement

Section Invited Speaker / Conférencier invité par la section

"Softening the Biological and Psychological Impacts of Stress: Physical Activity as Resiliency"

Eli Putterman, University of British Columbia (UBC)

"Mid-Career Investigator Award Presentation and Reception"

Presented by the Mid-Career Investigator Award recipient / Présenté par le récipiendaire de la bourse du chercheur en milieu de carrière

Annual Meeting / Assemblée générale annuelle

History and Philosophy of Psychology / Histoire et philosophie de la psychologie

Section Invited Speaker / Conférencier invité par la section "Are There Foundations in Understanding Knowledge?"
Leo Mos, University of Alberta, Departments of Psychology and Linguistics Annual Meeting / Assemblée générale annuelle

$Industrial\ Organizational\ Psychology\ /\ Psychologie\ industrielle\ et\ organisationnelle$

Section Invited Speaker / Conférencier invité par la section "The Science of Meetings at Work: Learnings, Implications, and Future Directions"

Steven Rogelberg, University of North Carolina Charlotte Annual Meeting / Assemblée générale annuelle

CPA SECTIONS RELATED PROGRAM / PROGRAMME LIÉ AUX SECTIONS DE LA SCP

International and Cross-Cultural Psychology / Psychologie internationale et interculturelle

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Cultural-Clinical Psychology: From Field to Lab to Clinic"

Andrew Ryder, Concordia University & Jewish General Hospital

*Featured Speaker / Conférencier

"The Importance of Mapping Human Values as Mental Concepts:

Experimental Evidence and Cross-Cultural Extensions"

Gregory Maio, Cardiff University

Annual Meeting / Assemblée générale annuelle

Psychologists and Retirement / Psychologues et la retraite

Section Invited Speaker / Conférencier invité par la section

"What do Psychologists Do in Retirement?"

John Conway

Annual Meeting / Assemblée générale annuelle

Reception / Réception

Psychologists in Hospitals and Health Centres / Psychologues en milieu hospitalier et en centres de santé

Section Invited Speaker / Conférencière invitée par la section

"From the Ground up: Experiences Building the Kelty Online Therapy Service at VCH"

Christine Kolrol, Vancouver Coastal Health Authority; Theo DeGagne,

Vancouver Coastal Health Authority

Annual Meeting / Assemblée générale annuelle

Reception / Réception

Psychology in the Military / Psychologie du milieu militaire

Annual Meeting / Assemblée générale annuelle

Psychology Religion and Spirituality / Psychologie, religion et spiritualité

Annual Meeting / Assemblée générale annuelle

Psychopharmacology / Psychopharmacologie

Annual Meeting / Assemblée générale annuelle

Quantitative Electrophysiology / Électrophysiologie quantitative

Section Invited Speaker / Conférencier invité par la section

"Quantitative EEG and EEG Data Bases and their application to EEG Neurofeedback"

Atholl Malcolm, A.T. Malcolm Consulting Inc., and A.T. Malcolm & Associates; John Davis, Psychologist and Associate Clinical Professor, Department of Psychiatry and Behavioral Neurosciences, McMaster University Annual Meeting / Assemblée générale annuelle

Quantitative Methods / Méthodes quantitatives

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Why I Dislike the Null Hypothesis Significance Testing Procedure"

David Trafimow, New Mexico State University

Section Invited Speaker / Conférencier invité par la section

"Integrative Longitudinal Lifespan "Research and Within-Person Assessment of Cognition in the Age of Precision Medicine"

Scott Hofer, University of Victoria

Annual Meeting / Assemblée générale annuelle

Reception / Réception

Rural and Northern Psychology / Psychologie des communautés rurales et nordiques

Section Invited Speaker / Conférencier invité par la section

"Twenty Years of the Rural & Northern Psychology Program in Manitoba: What we Have Learned"

Table des matières

Bob McIlwraith, University of Manitoba & Winnipeg Regional Health Authority Annual Meeting / Assemblée générale annuelle Reception / Réception

Sexual Orientation and Gender Identity / Orientation sexuelle et identité sexuelle

Section Invited Speaker / Conférencier invité par la section

"Where's the Sex Dammit?: Psychologists' Elision of Disgust in the

Assessment of Homonegativity"

Todd Morrison, University of Saskatchewan

Annual Meeting / Assemblée générale annuelle

Social and Personality Psychology / Psychologie sociale et de la personnalité

*Featured Speaker / Conférencier

"The Importance of Mapping Human Values as Mental Concepts:

Experimental Evidence and Cross-Cultural Extensions"

Gregory Maio, Cardiff University

Annual Meeting / Assemblée générale annuelle

Reception / Réception

Sport and Exercise Psychology / Psychologie du sport et de l'exercice

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Passion in Sport and Exercise: Theory and Research"

Robert Vallerand, Université du Québec à Montréal

Annual Meeting / Assemblée générale annuelle

Students in Psychology / Étudiants en psychologie

*CPA/Section Co-sponsored Invited Speaker / Conférencier invité par la SCP et la section

"Why I Dislike the Null Hypothesis Testing Procedure"

David Trafimow, New Mexico State University

Section Invited Speaker / Conférencier invité par la section

"Exploring Dr. Frederick Grouzet's Research: from Personal Goals to Well-Being"

Frederick Grouzet, University of Victoria

Annual Meeting / Assemblée générale annuelle

Teaching of Psychology / Enseignement de la psychologie

Section Invited Speaker / Conférencier invité par la section

"The New Science of Learning"

Michael Atkinson, Western University

Annual Meeting / Assemblée générale annuelle

Traumatic Stress / Stress traumatique

Section Invited Speaker / Conférencière invitée par la section

"Developmental Couple Therapy for Complex Trauma"

Heather MacIntosh, McGill University

Annual Meeting / Assemblée générale annuelle

Reception / Réception

Women and Psychology / Femmes et psychologie

*CPA/Section Co-sponsored Invited Speaker / Conférencière invitée par la SCP et la section

"Pay, Power, and Possibilities: The Slow Closing of the Gender "Value" Gap" Hilary Lips, Radford University

Section Invited Speaker / Conférencière invitée par la section

"Academic Activism: Dancing with Wicked Questions"

Colleen MacQuarrie, University of Prince Edward Island

Annual Meeting / Assemblée générale annuelle

Reception / Réception

*Speaker nominated by multiple sections

* Conférencier invité par plus d'une section



Jean Linse Pettifor: 1922 - 2015

Carole Sinclair, Ph.D. & Janel Gauthier, Ph.D. CPA Committee on Ethics

The CPA Committee on Ethics lost one of its most esteemed members, Dr. Jean Pettifor, on November 8, 2015 when she passed away peacefully in Calgary at the age of 93. Her passing is a huge loss to the Committee, to the Canadian Psychological Association and to the broader Canadian and international psychology communities.

Roots

Jean was born in Scott, Saskatchewan to Sophia and Charles Dixon. Her father was a successful farmer. Her mother, in addition to raising four children, was very politically active and well known in the women's movement, receiving a Governor-Generals Award in 1979 for her outstanding contributions to the

status of rural women. To ensure higher education opportunities for their children, the family moved to Saskatoon in 1941.

Jean's upbringing greatly influenced her approach to life. She entered adulthood with strong values regarding hard work, community action, and social justice. These values permeated her work in psychology throughout her life.

Education

Jean began her career as a high school teacher and assistant principal. She then began lecturing in educational psychology at the University of Alberta, while simultaneously earning not one, but

two master's degrees - one in English literature, the other in psychology. She started her work in Alberta's mental health services in 1948 and earned her doctorate in clinical psychology from Wayne State University in 1964. After serving in several senior positions with Alberta Mental Health Services over a 41-year career, Jean "retired" in 1989.

Contributions to Organized Psychology

While working with the Alberta government, Jean became very active in organized psychology. In addition to holding several positions with the Psychologists' Association of Alberta, including being its President in 1974-75, she was Chair of the CPA Applied Division in 1977-78, became a member of the CPA Committee on Ethics in 1980 (serving as Co-Chair from 1989 to 1993), and a member of the CPA Board of Directors in 1989. During this time, she was also a member or Chair of several Section executives and CPA committees, including Professional Affairs, Publications, Status of Women, Continuing Education, State of the Discipline Review, and Community Psychology.

Jean's retirement from her work with the Alberta government in 1989 allowed her to devote even more of her time to teaching at the University of Calgary, consulting, publishing, and presenting at conferences. It also allowed her more time for mentoring others and taking on leadership roles in organized psychology. She became President of CPA in 1994-95 and President of the College of Alberta Psychologists in 1998-99.

Contributions to Psychology and Ethics

Listing all of these positions, however, only tells part of the story. Even more striking are the many projects Jean initiated or to which she made significant contributions during her lifetime.

In 1977, she approached a small group of Toronto psychologists who had presented a series of papers at CPA's convention that included a critical review of the code of ethics of the Amer-

ican Psychological Association as a standards document, and encouraged them to take on the task of developing what eventually became the *Canadian Code of Ethics for Psychologists*. She acted as a key support and mentor throughout the nine years required to achieve the adoption of the *Code* by CPA in 1986. She then co-authored, the first edition of the *Companion Manual* to the *Code* (1988), as well as its next two editions (1992 and 2001), with Carole Sinclair. She was also integrally involved in the development of several CPA ethical guidelines, including *Ethical Guidelines for Therapy and Coun-*

selling with Women (1980), Guidelines for Non-discriminatory Practice (2001), Guidelines for Psychologists Addressing Recovered Memories (2001), and Ethical Guidelines for Supervision: Teaching, Research, Practice and Supervision (2009).

In addition to having attended and presented at every CPA convention from 1972 to 2015, from 1995 to 2014 Jean attended, arranged workshops and symposia, and presented at every international congress of the International Union of Psychological Science, the International Association for Applied Psychology, and the European Federation of Psychologists Associations. As part of her work with the international psychology community, she was involved in the development of the *Universal Declaration of Ethical Principles for Psychologists* - a project of the International Union of Psychological Science and the International Association for Applied Psychology - providing strong and relentless support, as well as thoughtful and timely advice, to Janel Gauthier who chaired the working group responsible for its development.

Out of a lifetime total of 111 refereed publications (almost all regarding ethics), 80 were published post-retirement, 26 in the last decade of her life!



Recognition

Jean's outstanding contributions were recognized by several organizations in the form of awards, including the Association of State and Psychology Board's Roger C. Smith Award for contributions to the regulation of psychology (1998), the CPA Gold Medal Award for Lifetime Contributions to Psychology (2003), an Honorary Doctor of Laws from the university of Athabaska for her distinguished contribution to law and ethics (2009) and, most recently, the Wilhelm Wundt – William James Award given jointly by the American Psychological Association and the European Federation of Psychologists Associations for her exceptional contributions to transatlantic psychology (2013), to name but a few.

Building a Better World

Jean strongly believed in the importance and power of ethical dialogue in meeting the psychology community's responsibility to ensure ethical behaviour by its members and to help the world become a better and more peaceful place where respect, justice, freedom, humanity, and wisdom prevail. In promoting this belief, she continually emphasized that ethical thinking and behaviour must be based on a deep respect and caring for all human beings. She believed that codes of ethics and the teaching of ethics need to do much more than outline "rules;" rather, they need to teach us to be ethically sensitive, to engage in ethical thinking, and to resolve difficult ethical dilemmas.

Jean modeled all that she believed and taught. It was hard for her to walk through the hallway at any convention without having at least one person she had supported, mentored, taught, or connected to a resource warmly thank her for all she had done for them and for the field at large. She was a remarkable woman who was highly admired and respected for her caring and wisdom by everyone everywhere, and she has left a remarkable legacy that will continue to inspire and influence our thinking about ethics and psychology for a long time to come.

Jean will be missed by her immediate family, her grandchildren, and great-grandchildren, as well as by psychologists across Alberta, Canada, and the world. Her beloved husband Dr. Richard Pettifor, also a leader in psychology, passed away in 1991.

Thank you Jean. Rest in peace.

John Thomas Goodman 1935-2014



John Conway, Ph.D.

Archivist and Historian, Canadian Psychological Association

John Goodman, the middle of seven children, was born on a farm in rural Ontario and spent much of his childhood near Sarnia.

After one year of studying industrial chemistry at Ryerson Polytechnical, he returned to Sarnia to work in the industry while also doing part-time studies at a junior college in Port Huron, Michigan. It was there he was introduced to psychology. He then moved on to Michigan State University where he earned his B.A., M.A. and in 1965 his Ph.D.

He completed a clinical internship at the Massachusetts Mental Health Centre, a psychoanalytically-oriented teaching hospital for Harvard Psychiatry. After graduating he spent a postdoctoral year at the University of Denver Medical School where he received some supervision from Bob Martin, another pioneering clinical psychologist in Canada (see In Memoriam, *Psynopsis*, Spring 2015, p. 66).

John's first job was as an Assistant Professor in the Department of Psychiatry at Yale where, in addition to practice and teaching, he underwent his own personal analysis, as was the custom.

In 1968 John returned to Canada to join the new McMaster University Medical School as Chief Psychologist at St Joseph's Hospital and the Chedoke McMaster Centre.

John moved to Ottawa in 1975 as the first Director of the (independent) Department of Psychology at the Children's Hospital of Eastern Ontario. He built a large, research productive, and highly respected department. He was also appointed as a Professor at the University of Ottawa in Psychology where he was research adviser for nine Ph.D. graduates. He was later appointed as Professor of Pediatrics in 1985.

John served the profession in many capacities over the years. He sat on CPA's Board of Directors from 1987 through1990, at which time he also chaired the Professional Affairs Committee and the Accreditation Panel. In 1999, he received the CPA Award for Distinguished Contributions to Psychology as a Profession, and he took the leading role in establishing the CPA Foundation, which was granted charitable status in 2001.

He was President of the College of Psychologists of Ontario from 1996 to 1998, and served on several committees of the Association of State and Provincial Psychology Boards. Among his accomplishments with the College was arranging a meeting with the provincial Minister of Health, something the regulatory body had never done in its 37 years in existence.

In retirement John served as a consultant to the RCMP on psychological testing and screening. He also continued to maintain a private practice in his home until the day he died.

John will be greatly missed.



A 31-Year Evolution in Understanding Poor Growth and Failure to Thrive:

From Mother Blame to Appetite Regulation

Maria Ramsay, Ph.D.

Director of the Pediatric Feeding Program and Professional Leader, Psychology, Montreal Children's Hospital, Assistant Professor of Pediatrics and Psychology (Professional), McGill University, MUHC

I started to treat children with failure to thrive at the Montreal Children's Hospital (MCH) in 1984 and established the first Failure to Thrive and Feeding Disorders Clinic at the MCH with a pediatrician in 1988. For the next 20 years, the clinic slowly built up its reputation in Montreal as the only clinic where an increasing number of psychologists learned to assess appetite regulation and the mother-child relationship around feeding; understanding that sensory-motor issues and child characteristics also play an important role. Accordingly, treatment modalities ranged from medication for low appetite to behavioural approaches. Research and teaching complimented our clinical work, which culminated in several publications and multiple presentations at international conferences.

I made it my mission to develop a comprehensive feeding program, and in 2008, the Pediatric Feeding Program (PFP) was established at the MCH. The Quebec government mandated the PFP to serve the Quebec population with its several psychologists, a gastroenterologist, a dietician, and an occupational therapist, where the psychologists play the primary role in the assessment and treatment of feeding problems.

In yet another defining event, "apparent lack of interest in eating" was listed as one of the causes for the diagnostic category Avoidant/Restrictive Food Intake Disorder (ARFID) in the DSM-5 (2013). Although the term "appetite" is still not used, at least the focus is on the child's state of hunger rather than blaming the mother for causing feeding problems and poor growth. Yet, "the challenge" is ongoing. Children are consistently admitted to hospitals all over Canada for failure to thrive and anemia, and their mothers are still blamed for "not feeding enough" or for "force feeding." Most pediatricians still do not make the connection between appetite regulation and the amount of food intake in children. And, perhaps more puzzling, most pediatric psychologists are equally unaware of how importantly low appetite in young children from birth to six years of age contributes to difficult feeding relationships.

Although the success of the PFP team in changing the lives of many young children (including those with tube feedings) over the past many years is reassuring, the progress must continue. It is my ultimate hope that fostering a dialogue among clinicians and educators alike will eventually lead to embracing feeding as a developmental skill that is initially, critically dependent upon internal motivation (i.e. appetite) to function, yet influences feeding behaviours and maternal and family reactions and behaviours in profound ways.

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THE UNIVERSITY OF CALGARY

Department of Psychology Graduate Studies



Jessica Switzer, doctoral student, & Leah Tobin, doctoral student and CPA Campus Representative

The University of Calgary (U of C) began offering courses in psychology in 1960 and established its Department of Psychology in 1962. In 1998, the department adopted the mission statement "Innovation and excellence in the generation, dissemination, and application of psychological knowledge" – a statement it continues to adhere to today.

Since its establishment, the department has grown significantly. It is currently comprised of 37 faculty members, 85 graduate students, and approximately 850 undergraduate students. The research conducted by the department is a strong contributor to U of C's "Eyes High" strategic plan to become one of the leading research institutions in the country. As such, faculty members currently hold competitive grants from agencies such as CIHR, NSERC, SSHRC, and NIH.

The Department of Psychology at U of C offers two graduate programs: The Psychology Graduate Program (i.e., experimental psychology) and the Clinical Psychology Graduate Program.

Psychology Graduate Program

The Psychology Graduate program was the first of the two programs to be offered at U of C. Students can obtain M.Sc.

and Ph.D. degrees in many areas of experimental psychology, including specialized training in one of three streams of study: Brain and Cognitive Science, Industrial-Organizational Psychology, and Social and Theoretical Psychology. The Brain and Cognitive Science stream focuses on brain structures and the mental processes involved in learning and memory, language, movement, and perception. The Industrial-Organizational stream is recognized as an official specialization and focuses on individual behaviour, the behaviour of groups, and the relationships of organization-wide variables to groups and individuals in workplace settings. Finally, the Social and Theoretical stream focuses on social and cultural relations, as well as the foundational and philosophical theories of psychology.

With these three streams of focus, students have the opportunity to take a variety of courses and collaborate with faculty and students outside of their graduate stream. From identifying teamwork factors that influence a patient's outcome in an emergency room, to studying circadian rhythms in cross-continental pilots, to learning how children come to understand some of the more complex social aspects of language; the research completed in the Psychology Graduate Program has important implications at both the theoretical and applied levels and leads students to an array job opportunities spanning academia and industry.



Clinical Psychology Graduate Program

In 1985, the Department of Psychology proposed a PhD Program in Clinical Psychology in response to the demand for such a program in Alberta. The program was established in 1989 under the direction of Dr. Keith Dobson and was accredited by the Canadian Psychological Association in 1995. The Clinical Psychology Graduate Program offers a two-year M.Sc. degree followed by a three-year Ph.D. program and offers a comprehensive education well-oriented

in both research and clinical practice. Adhering to the scientist-practitioner model, the program provides students with an integration of academic knowledge, research skills, and supervised clinical work in a variety of practicum and internship settings. With many connections to Alberta Health Services, graduate students are afforded the opportunity to work in a variety of settings, including hospitals, mental health agencies, school boards, and private practice, among others. The department also recently opened

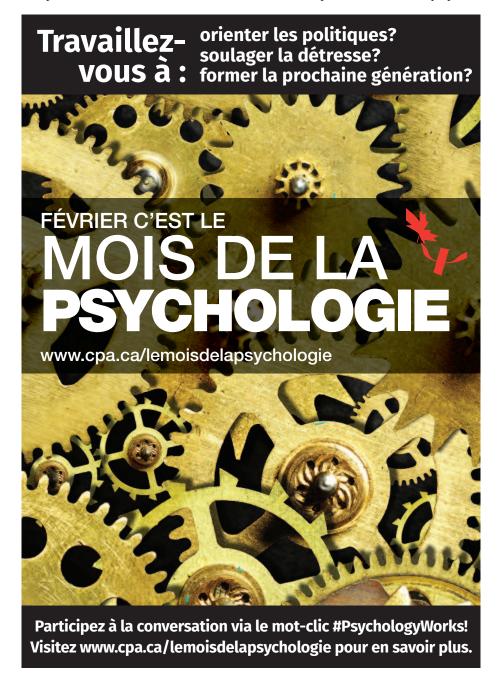
an in-house training clinic at the university, which provides students with additional training opportunities and meets the growing demand for mental health services in the Calgary community.

Student Life

Since many of U of C's graduate students are recruited from out-of-province, the university offers frequent opportunities to meet other students both within and outside of the Department of Psychology. Within the department, the Psychology Graduate Student Association actively coordinates seminars, social events, and friendly faculty-student trivia games to encourage networking and socializing. Students also play a crucial role in curriculum development initiatives and have the opportunity to serve as student representatives on their respective program committees. Outside of the department, there are numerous ways to meet new people and become an active member of the community in Calgary. With the beautiful Rocky Mountains a short 30 minute drive away, the U of C Outdoors Club offers a variety of programs including rock climbing, skiing, canoeing, white-water rafting, and cycling. With the high demands of graduate studies, many students in the department take advantage of these activities to maintain a healthy work-life balance.

While the minimum guaranteed funding for the U of C psychology program is competitive, most graduate students also hold external scholarships, including awards from SSHRC, CIHR, NSERC, the Vanier Canada Graduate Scholarship Program, Fulbright Canada, Alberta Innovates: Health Solutions, the Alberta Gambling Research Institute, and the Alberta Children's Hospital Research Institute. As a result of the minimum funding guarantee and the high number of external scholarship holders, U of C's average funding level is approximately \$30,000 per year - a highly competitive salary in an affordable metropolitan city.

For more information about the graduate psychology programs at the University of Calgary, please visit psyc.ucalgary.ca/graduate-program. The mountains are calling!



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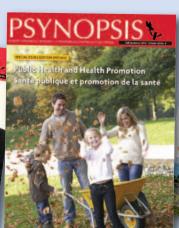
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Finding a Home for the Homeless: The At Home/Chez Soi Study

Paula Goering, RN, Ph.D. Research Lead, MHCC At Home/Chez Soi

from page 8

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Return to article



The Transformative Power of Music

Simon Abbott, Music Director, Phoenix Community Choir; Scott Jones, Arts Administrator, Youth Development Program; and Valerie Shapiro, MSW, Director of Community Programs.

from page 10

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Return to article

Shrinking the distance between Isolation and Opportunity: Community Engagement in Mulgrave Park

Valerie Shapiro, MSW, Director of Community Programs; Maurice James, Phoenix Youth and Community Centre Coordinator; and Carla Sheppard, Community Outreach Worker, Phoenix Youth and Community Centre

from page 14

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Return to article

Hidden Homelessness and Service Needs Among Male Youth: Implications for Service Provision

Julie L. Wershler & Scott T. Ronis, Department of Psychology, University of New Brunswick

from page 15

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Return to article

Examining Health Literacy Levels in Homeless Persons and Vulnerably Housed Persons with Mental Health Disorders

Susan Farrell, Ph.D., C.Psych. and Michael Dunn, M.Sc. The Royal and Canadian Mental Health Association (Simcoe County Branch)

from page 16

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Return to article

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Profile of HHIT study findings: A Longitudinal Study of the Health and Housing Transitions of Homeless and Vulnerably Housed Adults in Three Canadian Cities

Rebecca A. Cherner, Susan Farrell, Stephen Hwang, Tim Aubry, Anita Palepu, Rosane Nisenbaum, Anita M. Hubley, Fran Klodawsky, Evie Gogosis, & Matthew J. To

from page 17

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Return to article

Housing first for Canada's homeless with At Home / Chez Soi: Reflections from the Mental Health Commission of Canada

Louise Bradley, President and Chief Executive Officer, Mental Health Commission of Canada

from page 19

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Return to article

Advocacy is Therapy: Why Moving Beyond an Individualized Approach is Critical to Effective and Ethical Practice

Alison Little, MSW, Melodie Skeete, MSW, Rachel Derocher, MSW, Fiona McAdam, MSW. Phoenix Prevention Program, Halifax, Nova Scotia.

from page 18

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Return to article