Spring, 2018 Volume 13, Issue 1

Message From the Chair

Welcome to the Spring 2018 issue of the Rural and Northern Section's newsletter, the View from Here.

As I write this, I can't help but reflect on the recent bus crash in rural Saskatchewan affecting not only the players involved in the tragedy, but their family members, health care providers, community members, and Canada as a whole. I passed through Hum-



boldt countless times travelling home on breaks from University in Saskatoon. Hockey was a staple growing up in rural Saskatchewan and continues to play a large role in life in Manitoba. I have a friend who is the statistician for an AHL team and spends much of the year traveling on a bus. Friends and colleagues are transporting little ones to games, kids are rolling hockey bags down the street to the local rink, and "at the game" is always the place to be; the hockey community is alive and well. These scenes are likely common in many communities across Canada and now, pull at the heart strings of Canadians. I am always impressed and uplifted at the support and kindness that can be given by strangers. I am also impressed with the awareness and appreciation of the mental health needs of all involved in this tragedy. First responders on the scene came from towns of fewer than 4500 people, and like every call, face a significant chance that they will know personally the individuals involved, but reportedly were immediately offered mental health support. Thank you to all the mental health practitioners in the area who have supported the accident victims, families, and communities in this time of grief and trauma.

Inside this Issue

- Message from the Chair—pg 1
- Service Award information—pg 3
- North Star Award
 Information—pg 4
- Volunteer Opportunities—pg 5
- Evolution of Psychotherapy Conference Review—pg 6
- ICAP/CPA 2018 info.
 —pg 7
- Brain Health—pg 9
- Career Opportunity
 __pg 10
- Student Feature—pg 12
- Editor's Comments pg 14

Message from the Chair, continued...

Now looking to the future, I am eagerly anticipating the ICAP conference this year and the opportunity for our Rural and Northern community to connect, learn together, and plan for the future. We have invited, along with the Aboriginal Section, **Dr. Jeff Ansloos** to speak on Indigenous Suicidality (<u>http://icap2018.com/division-section-invited-speakers/#JeffAnsloos</u>).

There will also be a poster session, discussion panel, chair's address, and general meeting as part of the Rural and Northern Section events. The section is very excited to be able to offer virtual participation in the AGM this year – look for details later in June! For more information about the R&N events at ICAP/CPA, go to <u>http://icap2018.com/</u> or see our review of events of page 7 of this newsletter.

Please also keep in mind the North Star Awards for student papers and posters, and the Award for Distinguished Professional Contribution to Rural and Northern Practice. I hope to see many of you in Montreal and enjoy the newsletter!

See you in Montréal!







Call for Nominations for the Distinguished Professional Contributions to Rural and Northern Practice Award

This award is intended to recognize outstanding rural and northern practitioners in psychology. Nominations will be considered for psychologists working in any area of rural and northern psychological practice (e.g., education and health services provision, consulting); and/or provide services to any patient population or professional clientele in a rural and northern setting. Services provided to diverse client groups or patient populations, including but not limited to children/adolescent/adults/older adults/elders, rural/remote/ northern populations, minority populations, and persons with serious mental illness will be considered. Contributions may be judged distinguished by virtue of peer recognition, advancement of the public's recognition of psychology as a profession, advancement of rural and northern practice through supervision/research/scholarly pursuits, relevant professional association honours, or other meritorious accomplishments denoting excellence as a rural and northern psychologist, including advancement of the profession.

Nomination packages must include:

- 1. A letter of nomination from a current Rural and Northern Section member detailing the nominees distinguished contribution.
- 2. At least two letters of support from individuals (beside the nominator) who know this persons' distinguished contribution to rural and northern practice. The letter is to be current, meaning written in the last calendar year.
- 3. A current curriculum vitae for the nominee.

Deadline for submission is May 1st 2018.

The recipient will be announced at the AGM of the Rural and Northern Section in June, 2018. Send nomination packet *by email* (in pdf format) to annamarie.carlson@umanitoba.ca

Connect on Social Media!



The Rural and Northern Section is on **Facebook!** Like our page to get up-to-date information about section activities!

Page 4



North Star Student Award — Now Accepting Applications

Are you a <u>student member</u> of the Rural and Northern section of CPA and presenting at the 2018 convention in Montreal?

The *North Star Student Award* (\$200 value) has been established by the Rural and Northern Psychology Section in 2008 to recognize

the student with the most meritorious submission to the Rural and Northern Section of the CPA annual convention. Any student whose presentation/poster has been accepted into the Rural and Northern Psychology Section Program is encouraged to apply. There are two categories of competition: poster presentations and oral presentations (symposia, review, conversation sessions). *One award will be available within each category*. Students with multiple convention submissions across these categories may apply for the award in both categories. Winning submissions will be recognized with a certificate and a monetary award, presented during the section's annual business meeting. The student will also be invited to describe his/her work in the fall issue of the Rural and Northern Psychology Newsletter, *The View from Here: Perspectives on Northern and Rural Psychology*.

To be eligible for this award you must:

- Be first author of a presentation/poster that has been accepted into the Section Program at the annual CPA convention, and a student at the time you did the work described in the paper.
- Notify the Section Chair that you wish to be considered for this award.
- Be prepared to attend an award ceremony at the convention (awards will be presented during the section's Annual Business Meeting).
- Be a member of the Rural and Northern Psychology Section at the time of the submission.

Please contact Chair, Dr. AnnaMarie Carlson, via e-mail: <u>AnnaMarie.Carlson@umanitoba.ca</u> if you wish to be considered for this award or if you have any questions.

Volunteer Opportunity: Newsletter Editor

We are looking for a volunteer to take on the role of newsletter editor. The ideal person would be a psychologist who is currently working in a rural/northern community or someone who is providing services to residents in rural/northern communities. The editor plays an integral role in facilitating communication and knowledge exchange between our membership. We have consistently received high praise for our newsletter and are committed to maintain this level of excellence.



The newsletter is published twice per year (fall and spring). The primary responsibilities of the editor include solicitation and review of articles as well as formatting the newsletter. Members of the section's executive committee are available to assist in identifying material for the newsletter.

Please contact either Dr. AnnaMarie Carlson, or Dr. Amanda Lints-Martindale (Amanda.Lints -Martindale@umanitoba.ca; Secretary/Treasurer & current newsletter editor) if you're interested in this position or would like more information.

Volunteer Opportunity: Provincial Representatives



Would you like to be more involved in the Rural and Northern section of CPA? **The Rural and Northern section of CPA is currently looking for provincial representatives** from each province and territory across the country. We currently have representatives from British Columbia, Saskatchewan, Manitoba and Nova Scotia; all other provinces and territories do not yet have a designated representative!! If you are interested in representing your province, please contact our chair, Dr. AnnaMarie Carlson at <u>AnnaMarie.Carlson@umanitoba.ca</u>.

Page 6

Conference Review: The Evolution of Psychotherapy Submitted by Dr. Shelley Goodwin

Amen, Beck, Loftus, Miller, Padesky, Perel, Sapolsky, Siegel, Sue, Vander Kolk, Yalom, and Zimbardo - all big names in psychology. Now imagine them all together. Welcome to the Evolution of Psychology conference put on by the Milton Erickson Foundation. It has been called the Woodstock



of psychotherapy and I can see why. It usually occurs every 4-5 years in Anaheim, California and it is an amazing experience.



A year ago I did not know that the Evolution of psychotherapy conference existed. As I write this, the 2017 conference is winding down and I am heading back to Nova Scotia. The opportunity to hear what these leaders are saying today, has been rewarding and thought-provoking. They have described how they developed their theories, conducted their research, progressed their careers and detailed their future research ideas.

To hear them speak in person, and to interact with them was beyond what I would ever imagine. To do this all within the same 5 days is quite remarkable. One interesting encounter occurred

Dr. Philip Zimbaro presenting

days is quite remarkable. One interesting encounter occurred when I walked into a session with Scott Miller. I was a bit late, and as

I entered the audience had partnered up and were chatting about a topic. I asked the man standing at the back what was happening and he advised they were engaged in an activity.

We chatted about the activity and as I went to find my seat I introduced myself and he did the same, Bill. I checked his tag as I was turning and registered his last name, Miller. I continued on through my day. Later that afternoon, as I was chatting with a friend about the next day's sessions, we indicated we were both going to Motivational Interviewing with you



Dr. Judith Beck presenting

Conference Review continued...

guessed it — William Miller. I went searching for a picture and sure enough there was the face of the man I had chatted with during the morning activity.

So if you are interested in hearing some or all of these people speak, consider Anaheim, CA for the next conference. While right next to the convention is Disneyland, I can assure you this conference is anything but Mickey Mouse.

For more information on the conference, visit the website: www.evolutionofpsychotherapy.com

ICAP/CPA for Rural & Northern Events

The Rural and Northern section of CPA have planned a number of events that will be of interest. Please join us on **Tuesday, June 26th** in **Room 516 E (level 5)** for :

1:45—2:45 pm Chair's Address presented by Dr. AnnaMarie Carlson entitled *Integrat*ing Health Psychology into Rural Practice

2:45—3:15 pm Panel Discussion: Accessing Mental Health Services in Rural and Northern Areas: An Examination of Challenges and Potential Solutions. Panel members include Drs Amanda Lints-Martindale, AnnaMarie Carlson, and Shelley Goodwin

5:00—6:00pm Annual General Meeting—stay tuned for information on how to <u>partici-</u> <u>pate virtually</u>!

ICAP/CPA will be held at the Palais de congrès in Montréal, Quebec. For more information on registration, accommodations, and the conference, please visit the website:

http://icap2018.com/



Maintaining Brain Health and Preventing Dementia Submitted by Dr. Vivek Sharma, C. Psych.

The benefits of getting regular sleep, exercise, and a healthy diet have long been encouraged as important for a healthy body, but more recent research has led support to the idea that these habits are also essential for maintaining your ability to think and in preventing the most common types of dementia.



Sleep:

Among adults, sleeping **7 to 8 hours per night appears to maximize thinking ability** and other physical health benefits. Sleeping more or less than 7 to 8 hours has been connected with a variety of negative physical and mental health effects (Buxton & Marcelli, 2010 ; Kronholm et al., 2009).

A study of over 5,400 London government workers, aged 45–69, followed participants for an average of 5.4 years to see if changes in sleeping time had any effect on their ability to think. After adjusting for age, gender, education, and type of job, the authors found that either **decreasing or increasing sleeping time from 6 to 8 hours per night resulted in reduced reasoning ability, vocabulary, language fluency, and overall thinking ability** (Ferrie et al., 2011).

Exercise:

A recent combined review of research studies found that **the ability to solve complex problems and control behavior was often improved by having recently exercised** (Chang, Labban, Gapin, & Etnier, 2012). A large group of government workers were followed over an 11-year period to see if exercise had any effect on thinking ability in adults. After adjusting results for age, education, gender, and physical and mental health, the authors found that **the ability to use logic in new situations and identify patterns was reduced in those who did not exercise** (Singh-Manoux et al., 2005).

Diet and Nutrition

Brain scans in patients who have physical diseases which affect blood flow through the body (e.g., diabetes, high blood pressure) often show changes in the strength of the brain tissues, including blockages in the small blood vessels of the brain. The good news is that many of these diseases (e.g., diabetes) can be controlled by eating a healthy diet and getting the nutrients that your body needs. Research looking at the effects of fat intake on thinking has found that **a high fat, low-carbohydrate diet results in reduced ability to**

Page 8

pay attention and think quickly than a more balanced diet of fruits, vegetables and grains (Holloway et al., 2011).

Health issues such as high blood pressure, diabetes, high cholesterol, and being overweight are often connected to each other, and a change in one can result in a change in others. For example, overweight patients who are able to lose weight by making changes in their diet and exercising more often have lower blood pressure, lower cholesterol, and blood sugar levels (Heneghan, Meron-Eldar, Brethauer, Schauer, & Young, 2011; Johnson, Brashear, Gupta, Rood, & Ryan, 2011).

Avoiding or Stopping Smoking

Cigarette smoking is connected with having an increased risk for the two most common types of dementia; vascular dementia and Alzheimer's disease (Barnes & Yaffe, 2011). Studies in **young and middle-aged adult smokers have often found reduced speed in thinking, verbal learning, and memory**. Recued ability to pay attention to something, control impulses, hold information in short term memory, and solve complex problems have also been found in smokers (Durazzo et al., 2010).

Long term studies have found that individuals, aged 43 to 53, who continue to smoke do significantly worse on memory tests compared to non-smokers (Richards et al., 2003). For those who are currently smoking, there is still hope! Stopping smoking can reduce or reverse losses to thinking ability that has occurred. A study found that former smokers were no more likely than non-smokers to perform in the bottom fifth, or the worst group, of all participants on tests measuring memory, reasoning, vocabulary, and language fluency (Sabia et al., 2012).

A recent study by Yolton, Dietrich, Auinger, Lanphear, and Hornung (2005) looked at how tobacco smoke effected the school performance and thinking of a group of almost 4,400 children ranging in age from 6 to 16 years old. The authors found that **exposure to environmental tobacco smoke was related to lower reading, math, and non-verbal problem solving abilities.**

<u>Summary</u>

In conclusion, getting 6 to 8 hours of sleep, getting regular physical exercise, eating a healthy diet, and not smoking are the best ways that you can keep your brain healthy, and reduce the risk of developing the most common types of dementia. The good news is that these recommendations and guidelines are not new to anyone, and that by following them you will not only be taking care of your body, but your brain as well.

References on page 10

Page 10

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Page 11

Career Opportunity! Clinical Psychologist—Geriatrics University of Manitoba & Prairie Mountain Health

The Prairie Mountain Health (PMH) Region and the Department of Clinical Health Psychology in the Max Rady College of Medicine, Rady Faculty of Health Sciences, University of Manitoba invite applications for a Contingent Geographic Full-Time (GFT) Clinical Psychologist (position # 25634) with a flexible start date, ideally beginning June 15, 2018 or as soon as possible thereafter, in the area of Geriatric Psychology. The position integrates clinical and academic roles (approximately 80% clinical; 20% clinical teaching/applied research). The successful applicant will be appointed to the Medical Staff of the PMH region and will be appointed to the Department of Clinical Health Psychology, Max Rady College of Medicine, at the Assistant Professor rank. <u>http://web.cpa.ca/new/docs/File/</u> Careers/2015-01/AMS-18032061128.pdf

The Clinical Psychologist will provide clinical services to older adults with complex emotional, mental health and adjustments needs, often occurring in combination with physical health issues; families and caregivers are also included in the scope of care. The Psychologist will work collaboratively as a member of the team within the full scope of their professional practice, and will be responsible for providing direct care, expert clinical assessment, recommendations and treatment as well as consultation service to the Centre for Geriatric Psychiatry (22 bed facility within Brandon Regional Health Centre), community-based Seniors' Mental Health, and the facility-based Mental Health Resource Nurses that serve designated rural hospitals and care homes.

The position is based in Brandon, Manitoba, which is Manitoba's second largest city (population 46,000) and is nestled along the Assiniboine River in the heart of southwestern Manitoba. The PMH Mental Health program offers a full spectrum of community and facility services across the lifespan. The successful applicant would join a robust interdisciplinary staff that includes mental health specialists such as psychologists and psychiatrists. For more information about the PMH region, visit <u>www.prairiemountainhealth.ca</u>.

As a member of the Department of Clinical Health Psychology, the Psychologist joins a large department of clinical colleagues who form a provincial network of consultation and mentorship across urban and rural settings. Department faculty as also engages in clinically applied research and clinical teaching of medical students and psychology residents. For more information, visit: <u>www.umanitoba.ca/</u><u>medicine/clinical_health_psych</u>.

Position Responsibilities:

- clinical psychology services to seniors, special needs patients in residential facilities, personal care homes and the community, including psychological and cognitive assessment, and individual or group-based interventions.
- Inter-professional rehabilitation and treatment planning
- Consultation with multi-disciplinary staff regarding behaviour management, case conceptualization and treatment implementation
- Facilitate continuing professional education of health professionals in facilities and in the community and clinical teaching of students in the health professions
- Applied clinical research and program evaluation

Qualifications:

- doctoral degree (PhD or PsyD) in Clinical Psychology from a CPA or APA-accredited clinical psychology training program, and completion of a CPA or APA-accredited internship/residency
- Eligible for registration or member in good standing as a psychologist (CPsych) with the Psychological Association of Manitoba
- Education, training, and experience in administration and interpretation of standard adult psychodiagnostic and cognitive psychological tests and measures. Training in clinical neuropsychology would be a significant asset.
- Education, training, and experience in psychological interventions; experience in rehabilitation would be an asset
- Education, training, and experience in geriatric psychology
- Ability to provide consultation to other mental health professionals and programs in areas of expertise, as required
- Training, experience, and/or research background/interests in Indigenous health would be an asset
- Excellent interpersonal relationship skills, oral and written communication skills, and inter-professional teamwork skills
- · Satisfactory results of pre-employment criminal records, child and adult abuse registry, and vulnerable persons checks

Interested persons should apply in writing referring to **position #25634**, including curriculum vitae, and provide the names and contact information of three references to: Dr. Lesley Graff, Chair—Search Committee Department of Clinical Health Psychology, Max Rady College of Medicine, Rady Faculty of Health Sciences, University of Manitoba. PZ 350—771 Bannatyne Ave., Winnipeg MB., R3E 3N4

Page 12

Student Feature: An Overview of the Rural Generalist Residency Program at the University of Manitoba—Part 1 of 2 Submitted by Michelle Conan, Ph.D. Candidate & R & N Student Rep.

As student representative for our section as well as one of the current rural residents in Manitoba, I am taking this opportunity to describe the first rotation of this residency position.

The first six months of the rural generalist positions are spent in the urban rotation, based in Winnipeg. The goal is to pro-



vide broad training with clinical populations across the lifespan. Beginning in September 2017, I was based out of St. Boniface Hospital (2 days/week) and the Manitoba Adolescent Treatment Centre (MATC; 2 days/week). This arrangement provided assessment and treatment experience with clients across the lifespan. It also allowed for exposure to many excellent supervisors and different styles of working.

At St. Boniface Hospital, my caseload was drawn from the areas of anxiety disorders and women's health. These services are ideal for generalist training as they offered the opportunity to work with a variety of presenting problems and, given the volume of referrals, to select cases based on training goals. Within the area of anxiety disorders I gained experience in individual psychotherapy and saw clients struggling with OCD, GAD, and more complex anxiety



presentations. In addition, I co-led a CBT-based group therapy program for individuals with generalized anxiety. Within the area of women's health, I was able to further develop my individual psychotherapy skills and worked with clients struggling with a broad range of presenting problems, including perinatal depression and anxiety as well as grief and loss due to stillbirth and relationship dissolution. Training opportunities in adult assessment were also available at St. Boniface Hospital. Amongst my other training, I was able to fit in one assessment (which focused on memory and personality functioning).

Student Feature continued...

At MATC, my caseload was drawn from several service areas for breadth in training. MATC is a multi-site organization that offers a wide variety of mental health services to children and adolescents. It is arranged in numerous multidisciplinary treatment teams which provided the opportunity to work with other professionals, including psychiatrists, occupational therapists, and mental health clinicians. My training was based primarily in the Community Child and Adolescent Treatment Service. Through this team I saw individual therapy clients and their families for problems related to disruptive behaviour, parent-child relational conflict, anxiety, and depression. Along with one of my supervisors and a mental health clinician, I co-led a group for parents of children who struggle with anxiety. In the area of assessment, training opportunities came from the ADHD Service and the Neurodevelopmental Service, with referral questions involving ADHD, learning disorders, anxiety, tic disorders, and autism spectrum disorder. In addition, because I did not have prior experience working on an inpatient unit, I was able to spend some time at MATC's Intensive Treatment Service gaining exposure to children and youth with severe psychiatric disorders.

Overall, the urban rotation provided numerous opportunities to develop skill in working with populations across the lifespan. Aligned with the values of this residency program, it was definitely a broadening experience. The first six months went by quickly and were very enjoy-able, and I am now looking forward to the rural part of this program! For more information about the Department of Clinical Health Psychology, go to http://umanitoba.ca/medicine/clinical_health_psych/. Additional information on the rural residency training program can be found at http://umanitoba.ca/faculties/health_sciences/medicine/units/clinical_health_psych/.



Night view of Winnipeg Legislature Buildings

Page 14

Editor's Comments Submitted by Dr. Amanda Lints-Martindale, C. Psych.

Greetings! I hope that you have enjoyed this issue of *The View from Here*—our Rural and Northern Newsletter. As always, I would like to extend my great appreciation to our contributors to this issue of the newsletter.

If you would like to make a contribution to *The View From Here*, please contact me directly by email (<u>Amanda.Lints-Martindale@umanitoba.ca</u>). Submissions can be made at any time, and can include:

- an article for our regular feature "a week/day in the life of a rural and/or northern psychologist"
- research findings and summaries
- information on upcoming conferences and training opportunities
- articles on the experience, challenges, and benefits of practicing in rural and/or northern locations
- photos
- ethical dilemmas
- book review(s)
- any other topic related to rural and northern psychology in Canada!

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

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

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